Polk County 4-H
Community Service Record Sheet

Name of Volunteer: _____ Month(s): _____

Date	# of Hours	Agency and Activities Performed	Verification Signature (Program Coordinator or 4-H Leader)

TOTAL: _____

For 4-H volunteers (teens or adults), count service hours related to 4-H work, such as travel time, meetings, activities, preparation time, and trainings with the 4-H office

For 4-H members, service activities may be any activity being performed, without cash payment or any other compensation, as a service to an organization or community member, who is not family. This may be activities outside the 4-H club, such as service to churches, community-based organizations, or other non-profit or government organizations. *Submit separately; do not include in 4-H Record Books.*