OATS Log for Community Service Hours

Volunteer's Name: _____

Street Address: _____

City, State, Zip _____

Phone: _____Cell Phone: _____eMail_____

If you need community service hours, we will be happy to provide you with a letter or form. However, it is <u>your responsibility</u> to bring this with you and have it signed, each time you come. Without this form, we will be unable to sign any forms for your participation.

Thanks for choosing O.A.T.S.! We really appreciate your help & couldn't exist without our dedicated volunteers!!

Date	Time In	OATS signature	Time Out	OATS signature	Volunteer's Initials	Total Hours