**AVID Community Service Log**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year 2018-2019\_\_\_\_\_\_\_\_\_\_

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| Date | Hours | Organization Sponsoring or Person Receiving Service | Description of ActivityCLASSROOM/Equipment HELP | Supervisor’s Signature |
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