

HENDRICKS COUNTY PROBATION DEPARTMENT

*101 W. Marion Street
Danville, IN 46122*

Telephone: (317) 745-9264 Fax: (317) 745-9319

COMMUNITY SERVICE WORK RECORD

Name: _____ Client No: _____

Probation Officer: _____ Number of Hours Assigned: _____

Offense: _____

*****Agency MUST be a Non-Profit Organization. Online community service WILL NOT be accepted regardless of whether they are considered a Non-Profit Organization*****

Name of Agency: _____

Address: _____

Telephone: _____ Fax: _____

Community Service Work Supervisor / Contact Person: _____

DATE	TIME IN	TIME OUT	TOTAL HOURS	SUPERVISOR'S SIGNATURE

General description of work completed: _____

Remarks: _____
