

HENDRICKS SUPERIOR COURTS PROBATION DEPARTMENT



101 W. Marion Street
Danville, Indiana 46122

Director
R. Todd McCormack

Phone: (317) 745-9264
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COMMUNITY SERVICE WORK RECORD

Name: _____ Client No.: _____

Probation Officer: _____ Number of Hours Assigned: _____

Hours to be completed by: _____ (**Agency MUST be Not-For-Profit**)

Name of Agency: _____

Address: _____

Telephone: _____ Fax: _____

Community Service Work Supervisor / Contact Person: _____

<u>DATE</u>	<u>TIME IN</u>	<u>TIME OUT</u>	<u>TOTAL HOURS</u>	<u>SUPERVISOR'S SIGNATURE</u>

General description of work completed:

Remarks:
