



**Phi Alpha Social Work Honor Society
 Tau Mu Chapter
 Service Hours Log Form**

Name: _____

Banner ID: _____

Phone: _____

E-mail: _____

Semester of Initiation: _____

Expected Graduation Date: _____

Phi Alpha is committed to volunteerism. Toward this goal, members must complete a minimum of 5 volunteer/service hours each semester (Fall and Spring). Please record your service activities below. Every member must submit this completed form as indicated below by the end of each semester.

Semester of Service (check one) Fall Spring Year 20_____

<i>Date</i>	<i>Activity & Description</i>	<i>Hours</i>	<i>Witness Signature</i>

I certify the above information is true and accurate.

Signature of Member

Date

*Please return this form to Jasmine Maloney, Program Coordinator by
 the day grades are due for the semester*

*Email: jasmine.maloney@slu.edu
 Office: Tegeler Hall, 203
 3550 Lindell Blvd., St. Louis, MO 63103*