



NAME _____

OF HOURS COMPLETED _____ COMPLETION DATE _____

POSITION _____ SUPERVISOR'S PHONE # _____

ALL COMMUNITY SERVICE HOURS MUST BE COMPLETED AT A NON-PROFIT ORGANIZATION. IF YOU DO NOT COMPLETE YOUR COMMUNITY SERVICE AT AN ACCEPTABLE NON-PROFIT ORGANIZATION YOU WILL BE REQUIRED TO RE-DO YOUR COMMUNITY SERVICE.

Nonprofit organizations are institutions that conduct their affairs for the purpose of assisting other individuals, groups, or causes rather than garnering profits for themselves. Nonprofit groups have no shareholders; do not distribute profits in a way that benefits members, directors, or other individuals in their private capacity; and are focused on bettering the general social fabric of their community. The most common definition of a non-profit organization is one that has been designated by the IRS as having 501(c)3 status.

DATE	TIME IN	TIME OUT	TOTAL HOURS	OFFENDERS SIGNATURE	SUPERVISOR SIGNATURE

CRSA Community Service Workers' Accident Medial Plan
Registration
For Community Service Workers

Community Service Workers Name: _____

Organization Name	Description of Duties	Dates of Service	Number of Hours Worked

Organization Information
Organization:
Name of Contact:
Department:
Phone Number:

Organization Information
Organization:
Name of Contact:
Department:
Phone Number:

Organization Information
Organization:
Name of Contact:
Department:
Phone Number:

THIS DOCUMENT MUST BE RETURNED TO THE COURT BY THE DUE DATE