Yuma County Adult Probation Department
Community Service Time Sheet

Month:_____ Year:_____

Name:_____ P.O.:_____
(Per case file)

[ ] DORC [ ] IPS [ ] Inactive [ ] Officer change _____ from _____

Days	Time In	Time Out	Hours Worked	Agency Name	Supervisor Signature

Total Hours:_____

1. Community Service sheets will be turned in at the end of the month to your probation officer.
2. Each box needs to be filled out properly by the supervising agency in order for community service hours to be valid.
3. The Community Service Coordinator is the only authorized person to approve two-for-one community service hours.
4. If you are on IPS, community service hours cannot be rolled over or applied to the following month.

The community service hours indicated above were completed by me on the date indicated. I understand that altering or falsifying the information is a violation of conditions of probation.

_____

Probationer Signature **Date**