



**ARDENNE HIGH SCHOOL**  
**COMMUNITY SERVICE PROGRAMME**  
10 Ardenne Road, Kingston 10  
Tel: (876) 927-8138 Fax: (876) 927-4784

AHS/CSP/ASL/24-25  
**STUDENT TIME CARD**

Name: \_\_\_\_\_

Year \_\_\_\_\_ to \_\_\_\_\_

Class: \_\_\_\_\_

House \_\_\_\_\_

Date	Activity/Service/Project	Log-in Time	Log-out Time	No. of hours	Supervisor's Signature

Committed to serve as we ...Seek the Best

**This form should be kept by students and signed by the supervisor at the end of each visit or completion of each task.**