



APPROVED – JUVENILE COMMUNITY SERVICE PROVIDERS

<p><u>J.E.R. Chilton YMCA at Rockwall</u> <i>(Ages 13 & up)</i> 1210 N Goliad St, Rockwall, TX 75087 (972)-772-9622 Mon-Thurs: 5am – 9pm Fri: 5am – 8pm Sat: 7am – 5pm Sun: 1pm-5pm</p>	<p><u>Rockwall Helping Hands</u> <i>(Ages 12 & up)</i> 401 W Rusk St. Suite 200 Rockwall, TX 75087 (972)-771-4357 Mon-Friday: 9am – 4pm</p>	<p><u>Boys and Girls Club – Rockwall Club</u> <i>(Ages 15 & up)</i> 3130 Fontanna Blvd Rockwall, TX 75032 (469)-897-0360 Mon-Sat: 6:30am -3:00pm</p>
<p><u>Rockwall Adoption Center</u> <i>(Ages 12 & up)</i> 1825 Airport Road Rockwall, TX 75087 (972)-771-7750 Mon-Fri: 9am – 6pm Sat: 9am – 5pm</p>	<p><u>Royse City Public Library</u> <i>(Ages 12 & up)</i> 309 N Arch St. Royse City, TX 75189 (972)-635-2772 Mon-Thurs: 10am – 6pm Fri: 10am – 5pm Sat: 10am-2pm</p>	<p><u>Royse City Animal Control</u> <i>(Ages 13 & up)</i> 1101 N. Josephine St. Royse City, TX 75189 (214)-934-9352 Mon-Fri: 8:30am – 4:30pm</p>
<p><u>The Salvation Army</u> <i>(Ages 15 & up)</i> 451 West Avenue D. Garland, TX 75040 (972)-272-4531 Mon-Fri: 9am – 6pm</p>	<p>*Community Service may be performed at your school <u>ONLY IF APPROVED BY THE SCHOOL.</u></p>	<p><u>Royse City Teen Court</u> <i>(Ages 12 & up)</i> 100 W. Main St. Royse City, TX 75087 (972)-636-9434 ONLY available the 3rd Wednesday of every month during the school calendar year.</p>

Please be sure that the Supervisor signs the log sheet AND provides a contact number.

**** All hours will be verified****



Defendant's Name: _____ Hours – Due by _____

Cause Number: _____

Juvenile Community Service Time Log

According to the conditions of your order, you are responsible for completing community service. This form is to provide verification of those hours. **if each section is not completed fully, the community service hours will not be accepted.**

<u>Date</u>	Work Description	Hours of Service	Contact Information
	Organization:	Time In:	Supervisor: _____ (print)
	Address:	Time Out:	Signature: _____
	Description of Work:	Total # of Hours:	Telephone: _____ Email: _____
<u>Date</u>	Work Description	Hours of Service:	Contact Information
	Organization:	Time In:	Supervisor: _____ (print)
	Address:	Time Out:	Signature: _____
	Description of Work:	Total # of Hours:	Telephone: _____ Email: _____
<u>Date</u>	Work Description	Hours of Service:	Contact Information
	Organization:	Time In:	Supervisor: _____ (print)
	Address:	Time Out:	Signature: _____
	Description of Work:	Total # of Hours:	Telephone: _____ Email: _____
<u>Date</u>	Work Description	Hours of Service:	Contact Information
	Organization:	Time In:	Supervisor: _____ (print)
	Address:	Time Out:	Signature: _____
	Description of Work:	Total # of Hours:	Telephone: _____ Email: _____
<u>TOTAL HOURS WORKED:</u>			