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Life Orientation Community Service Log

LEARNER NAME GRADE

SCHOOL CENTRE NO:

Date	Start Time	End Time	Hours Completed	Service Details (organisation name; description of volunteer work)	Name of Supervisor Overseeing CST	Signature of Supervisor

Annexure A Cont.						
LEARNER NAME:		GRADE:				
SCHOOL:		CENTRE NO:				
Supporting Table for LO Community Service Log (if applicable):						
Date	Organisation Name		Organisation Stamp			