

# LOS ANGELES CITY COLLEGE

## SPEECH 72 Listening and Speaking

### Volunteer Hour Sheet

**TIME SHEET**

Organization Name \_\_\_\_\_  
 Organization Contact \_\_\_\_\_  
 Organization Phone \_\_\_\_\_  
 Organization Fax \_\_\_\_\_  
 Organization Email \_\_\_\_\_  
 LA City Sp. 72 Student Name \_\_\_\_\_  
 Job Title \_\_\_\_\_

DATE	Hours completed	Authorized Signature	Title

Form is due 5-24. Please return with student to class. Forms may also be emailed to [Kahn.rosalyn@gmail.com](mailto:Kahn.rosalyn@gmail.com). Note it header SP72.

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