Court of Common Pleas
**of Chester County**

Juvenile Probation Department

**Donald F. Corry**
Chief Juvenile Probation Officer

**Jay Leamy**
Deputy Chief

**Jewel Jones**
Deputy Chief

## SCHEDULE/TIME SHEET

Youth's name: _____ Age (DOB): _____

Hours Assigned: _____ Site: _____

Job Assignment: _____ Supervisor: _____

Restitution Program: _____ Site Phone #: _____

| **Date** | Time In: | Time Out: | **TOTAL** | Staff Initials |
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| **Date** | Time In: | Time Out: | **TOTAL** | Staff Initials |
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Total # of hours Completed: _____ Date Completed: _____

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Youth Signature: Supervisor's Signature

Supervisor's comments on Youth's performance and attitude:

_____

_____

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