San Miguel County DWI Program
Community Service Program

Please Fax Completed Sheet to DWI Office at 505-425-5282

Agency:_____ Contact Person:_____
Address:_____Phone:_____
Defendant: _____Docket Number:_____
Community Service Hours:_____ Date Due:_____

Date	Time In	Time Out	Hours Worked	Initials

Total _____

Community Service must be done at a non-profit, religious, or government agency and must be pre-approved by your Compliance Monitor. I understand that if I intend to complete Community Service hours outside of San Miguel County, I must obtain prior approval from the DWI Compliance Monitor before I begin.

_____ _____
Supervisor Signature Date

_____ _____
Client Signature Date

Revised 3/23/17 yc