

Student Name: _____

Grade: _____

Name of Activity/Organization: _____ **In/Out of School:** _____

Description of Service:

Number of Hours: _____ Supervisor Signature: _____

Name of Activity/Organization: _____ **In/Out of School:** _____

Description of Service:

Number of Hours: _____ Supervisor Signature: _____

Name of Activity/Organization: _____ **In/Out of School:** _____

Description of Service:

Number of Hours: _____ Supervisor Signature: _____

Name of Activity/Organization: _____ **In/Out of School:** _____

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Number of Hours: _____ Supervisor Signature: _____

Name of Activity/Organization: _____ **In/Out of School:** _____

Description of Service:

Number of Hours: _____ Supervisor Signature: _____

****A minimum of twelve (12) service hours are required per year. A minimum of six (6) in school and six (6) out of school hours are required. A maximum of three (3) hours per activity are allowed.****