**National Honor Society Community Service Verification Form**

You may photocopy this page for additional projects as necessary or attach additional information.

**Name of Student(s):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Specific Date of Service (month/day/year):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Clock-time served (hh:mm start and end):** \_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_ **Total Hours:**  \_\_\_\_\_\_

**Name of Organization/Group**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description of service rendered or service project:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**LEGIBLY PRINTED Name of Adult Sponsor/Supervisor (Not Parent) Contact’s Phone Number**

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**Signature of Adult Sponsor/Supervisor (Not Parent) Contact’s Email Address**

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**Name of Student(s):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Specific Date of Service (month/day/year):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Clock-time served (hh:mm start and end):** \_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_ **Total Hours:**  \_\_\_\_\_\_

**Name of Organization/Group**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description of service rendered or service project:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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