

National Honor Society Service Hours Form Volunteer service for which no compensation was received.

Member Name:	Grade:
	ice:
Name of organization:	
Primary role:	
Name of Supervisor	Supervisor Contact Phone #
By signing, I certify that the information on this for	m is presented accurately and honestly.
Signature of Supervisor	
National Honor Society Ser Volunteer service for which no com	rvice Hours Form
Member Name:	Grade:
Hours of Service: Date(s) of Service	ce:
Name of organization:	
Description of service:	
Name of Supervisor	Supervisor Contact Phone #
By signing, I certify that the information on this form	m is presented accurately and honestly.
Signature of Supervisor	