



**ALL HOURS MUST BE SUBMITTED DIRECTLY TO EACH CLUB SPONSOR BY FRIDAY 5/1/20**

Student Name \_\_\_\_\_

Grade Level \_\_\_\_\_

**2019-2020 Community Service Hours Form  
BETA, National Honor Society, National Business Honor Society & Spanish Honor Society**

| Detailed description of service performed & non-profit organization | Date service was performed | Hours/Minutes service was performed | Supervisor's Printed Name, Signature, Phone #, & Email        | To which club & how many hours should your service be allocated?  |
|---|----------------------------|-------------------------------------|---|---|
|   |                            |                                     | Name _____<br>Signature _____<br>Phone # _____<br>Email _____ | *Make a copy if more than one checked<br><input type="checkbox"/> BETA _____<br><input type="checkbox"/> NHS _____<br><input type="checkbox"/> NBHS _____<br><input type="checkbox"/> SHS _____ |
|   |                            |                                     | Name _____<br>Signature _____<br>Phone # _____<br>Email _____ | *Make a copy if more than one checked<br><input type="checkbox"/> BETA _____<br><input type="checkbox"/> NHS _____<br><input type="checkbox"/> NBHS _____<br><input type="checkbox"/> SHS _____ |
|   |                            |                                     | Name _____<br>Signature _____<br>Phone # _____<br>Email _____ | *Make a copy if more than one checked<br><input type="checkbox"/> BETA _____<br><input type="checkbox"/> NHS _____<br><input type="checkbox"/> NBHS _____<br><input type="checkbox"/> SHS _____ |

|                        |                   |
|------------------------|-------------------|
| <b>Office Use Only</b> |                   |
| _____                  | _____             |
| <b>Date Entered</b>    | <b>Entered By</b> |