Community Service Guidelines

“Community service” is defined as service/community activities that are done OUTSIDE of school time for or on behalf of others (but NOT for family, friends, or neighbors), for which no compensation (monetary or other) has been given, e.g., for church groups or clubs/organizations sponsored outside the school.

1. Members are required to earn 14 Individual Service points each semester. Thirty minutes of service = one point.
2. Individual Service points earned beyond the required 14 points may NOT be used towards Chapter Service points.
3. DO NOT USE ACRONYMS. Spell out the names of groups, organizations, activities, etc.
4. All service must be done through a group or organization.
5. The “Supervisor Signature” must be an adult, not a student. Do not turn in this form without an adult’s signature. Do not ask sponsors to call for proof of service.
6. Signatures should be obtained at the time of service.
7. Recurring service activities must be listed separately.
8. If service is required or expected for another CAHS club or organization, you may NOT use those points/hours for NHS service.

NOTE: If an exception to any of the above is desired, prior approval by an NHS adviser must be obtained.

Service Event #1: It is not necessary to fill out all three service events on this page before turning in this form.

<table>
<thead>
<tr>
<th>Date:</th>
<th>Start Time:</th>
<th>Stop Time:</th>
<th>Total Hours:</th>
<th>Points:</th>
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Description of Service Performed:

Organization/Group:

Supervisor Signature: ___________________ Position: ___________________

Supervisor Printed Name: ___________________ Phone #: ___________________

Service Event #2: It is not necessary to fill out all three service events on this page before turning in this form.

<table>
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<tr>
<th>Date:</th>
<th>Start Time:</th>
<th>Stop Time:</th>
<th>Total Hours:</th>
<th>Points:</th>
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Description of Service Performed:

Organization/Group:

Supervisor Signature: ___________________ Position: ___________________

Supervisor Printed Name: ___________________ Phone #: ___________________

Service Event #3: It is not necessary to fill out all three service events on this page before turning in this form.

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<th>Start Time:</th>
<th>Stop Time:</th>
<th>Total Hours:</th>
<th>Points:</th>
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Description of Service Performed:

Organization/Group:

Supervisor Signature: ___________________ Position: ___________________

Supervisor Printed Name: ___________________ Phone #: ___________________

This form must be turned in to the “Completed Points Sheets” drawer in Room C115.

**YOU ARE RESPONSIBLE FOR RETAINING A COPY OF THIS FORM FOR YOUR RECORDS.**

I acknowledge that the service hours/points and signatures listed on this form are true and complete. I understand that any false information or misrepresentation will result in disciplinary actions with the National Honor Society.

Student Signature ___________________________ Date ________________

This form cannot be processed without the Student Signature.