

	Name: _		Date(s):
KA LA			
Grade:	Junior	Senior	
Summer Hours:	Yes	No	
Type of Hours:	Individual	Chapter	
Number of Hours Vol Brief description of se		(use hours or half hours)	
verify all the above t	to be correct:		
Signature of Supervis	sor	Signature of Stud	lent
Furn this form into NHS Secretary - Sami Brenno			
NATIONAL HONOR SOCIETY	Name: _		Date(s):
A LY			
Grade:	Junior	Senior	
Summer Hours:	Yes	No	
Type of Hours:	Individual	Chapter	
Number of Hours Volunteered: (use hours or half hours) Brief description of service hours:			
verify all the above to be correct:			

Signature of Student

Turn this form into NHS Secretary - Sami Brenno

Signature of Supervisor