

MEMBER NAME: _____ GRADE: _____

**Tuscola High School National Honor Society
Student Service Hour Contract
2016-2017**

- Community service shall be defined as time and effort spent without payment in money or favors to complete a task, which directly benefits a person or persons in the school and/or community.
 - Requirements for members:
 - Complete a minimum of **sixteen** community service hours per year: 8 hours by the December meeting and 8 more by the April meeting.
 - 8 of these must be in-school service and completed at Tuscola
 - 8 of these must be community service hours (not completed at Tuscola).
 - A **minimum** of 4 different service projects must be completed.
 - The service hours must be documented on this form and contain an authorizing signature from an adult who personally supervised the service by the member. This adult should be someone other than a family member.
 - Service hours listed below may only be used for National Honor Society. Service hours used for another organization or club may not be counted toward your required NHS service hours.
 - The service must be performed during the academic school year.
 - **Each service hour must have a detailed description to show great character and leadership.**
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Location of Service: _____ Date of Service: _____
Total Time Spent: _____ Circle one: In School Out of School

Adult Supervising the Project (address and phone not necessary if completed at THS):

Name: _____
Address: _____
Phone: _____
Signature: _____

Description of service project: _____

Location of Service: _____ Date of Service: _____
Total Time Spent: _____ Circle one: In School Out of School

Adult Supervising the Project (address and phone not necessary if completed at THS):

Name: _____
Address: _____
Phone: _____
Signature: _____

Description of service project: _____

MEMBER NAME: _____ GRADE: _____

Location of Service: _____ Date of Service: _____

Total Time Spent: _____ Circle one: In School Out of School

Adult Supervising the Project (address and phone not necessary if completed at THS):

Name: _____

Address: _____

Phone: _____

Signature: _____

Description of service project: _____

Location of Service: _____ Date of Service: _____

Total Time Spent: _____ Circle one: In School Out of School

Adult Supervising the Project (address and phone not necessary if completed at THS):

Name: _____

Address: _____

Phone: _____

Signature: _____

Description of service project: _____

Location of Service: _____ Date of Service: _____

Total Time Spent: _____ Circle one: In School Out of School

Adult Supervising the Project (address and phone not necessary if completed at THS):

Name: _____

Address: _____

Phone: _____

Signature: _____

Description of service project: _____
