



**CHARACTER • SCHOLARSHIP • LEADERSHIP • SERVICE**

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

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

Location & <u>description</u> of Activity	Volunteer Coordinator's Name, Contact info		Date	Hours Type & Qty ( ✓ , #)		Signature of Volunteer Coordinator
				Individual	Chapter	
	name	Contact info				

I understand that character and honesty are core values of the National Honor Society. As such, I affirm that the hours I am submitting are true, correct and were performed solely by me and signed by an authorized representative of the non-profit. I understand that if my hours are found not to be a true or accurate representation of the service I provided, my membership in NHS may be revoked.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_