

Character Scholarship



Leadership Service

**Wallenpaupack Area High School
Community Service Documentation Form (non-School Based)
2022-2023**

NHS Member Name: _____

Grade: _____

I confirm that the above member volunteered at _____
(Event name & Sponsoring Charitable Organization Name)
on _____ for _____ hours.
(Date)

1. Print the name of the group, team, or organization for whom you are performing the volunteer service?

2. Are you a member of this group, team, or organization? Yes No

- **This form must be submitted to the chapter secretary within two weeks of event completion.**
- **Only hours completed during the annual cycle count for the year (see page 5, #4 of the by-laws).**
- **Summer hours must be submitted to the chapter secretary by the second, full week of school.**

List of completed tasks:

_____ Print Supervisor's Name

_____ Event Supervisor's Official Title

_____ Event Supervisor's Signature

_____ Event Supervisor's Phone Number

Questions? Please contact the National Honor Society Advisors at Wallenpaupack Area High School.

Mrs. Mary Gilson (570) 226-4557, ext. 5220 --- Mrs. Rita Saylor (570) 226-4557, ext. 5700