Service hours verification form

EXAMPLE

Use one form per student. Every line needs the supervisor's name, phone or email, and signature, or it may not be counted.

Ridgecrest High School	Key Club	2026-27	25	Fri, Dec 11, 2026
SCHOOL	CLUB OR CHAPTER (NHS, KEY CLUB...)	SCHOOL YEAR	HOURS REQUIRED	DUE DATE

Marcus Webb	Class of 2029	204871	mwebb@example.org
STUDENT NAME	GRADE OR GRADUATION YEAR	STUDENT ID	STUDENT EMAIL OR PHONE

Date	Organization and address	What you did	Hours	Supervisor name	Supervisor phone or email	Supervisor signature
9/12/26	Northside Food Pantry, 1420 Elm St.	Unloaded truck, sorted cans	2.50	Rosa Torres	(619) 555-0142	Rosa Torres
10/3/26	County Animal Shelter, 88 Harbor Rd	Walked dogs, cleaned kennels	3.25	Sam Patel	spatel@example.org	S. Patel
10/10/26	Lincoln Elementary, 501 Oak Ave	Game booth, fall carnival	4.00	Dana Hughes (PTA)	(619) 555-0187	D. Hughes
10/24/26	Grove St. Community Garden	Built raised beds	3.00	Chris Alvarez	calvarez@example.org	C. Alvarez
11/1/26	Bayview Senior Center, 230 Pine St	Helped run bingo night	2.00	Linda Okafor	(619) 555-0110	L. Okafor
		Total hours on this form	14.75	Supervisors: by signing, you confirm the student did this work on this date.		

I confirm these hours are accurate and that I was not paid for this service.

Marcus Webb	11/6/26
STUDENT SIGNATURE	DATE
Angela Webb	11/6/26
PARENT OR GUARDIAN SIGNATURE	DATE

OFFICE USE ONLY

Date received: 11/9/26

Hours approved: 14.75

Advisor initials: MA

Notes: _____

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Use one form per student. Every line needs the supervisor's name, phone or email, and signature, or it may not be counted.

SCHOOL | CLUB OR CHAPTER (NHS, KEY CLUB...) | SCHOOL YEAR | HOURS REQUIRED | DUE DATE

STUDENT NAME | GRADE OR GRADUATION YEAR | STUDENT ID | STUDENT EMAIL OR PHONE

Date	Organization and address	What you did	Hours	Supervisor name	Supervisor phone or email	Supervisor signature
Total hours on this form				Supervisors: by signing, you confirm the student did this work on this date.		

I confirm these hours are accurate and that I was not paid for this service.

STUDENT SIGNATURE | DATE

PARENT OR GUARDIAN SIGNATURE | DATE

OFFICE USE ONLY

Date received: _____

Hours approved: _____

Advisor initials: _____

Notes: _____

Our chapter's rules for service hours

Advisors: fill this in once, then print it on the back of the form. Rules differ from chapter to chapter, so nothing here is pre-filled.

What counts as service

What doesn't count (for example: paid work, helping family, hours already used for a class)

Deadlines (mid-year check, final due date) and where to turn in this form

Questions? Contact (name, room, email)

How to fill out the form

- Write one line per visit, even if you went to the same place twice.
- Get the signature on the day you volunteer. Tracking someone down weeks later is the main reason forms come back incomplete.
- The supervisor has to be an adult at the organization, not a parent or another student.
- Write the hours to the quarter hour (2.25, 2.5, 2.75). Don't count travel time unless your chapter says you can.
- Keep a photo of the form before you turn it in.