

2018-19 Anoka-Hennepin School District

Blaine High School Verification of Volunteer Hours

ALL STUDENTS:
Student ID #
Grade:
Graduation Year: 20

Stud	ent Name	:							
Wher	e do you w	ant the c	redit for this vo	lunteer service?	(CHOOSE	ONLY	ONE)		
	☐ Gove	ernmen	Class: Teacher			_ Tri	Period		Teacher recorded
	National Honor Society					AVID)		
	☐ Beng	als In Ac	tion/LEO Club				Other club, group, team (please		please indicate name)
	☐ Not p	part of a	f a school club, group, team, class						
How	v did you l	earn ab	out and/or sig	ın up for this or	oportunity	?			
Ţ	☐ Throug	gh the Y	outh Service F	Program at scho	ool (ie Sigr	n-up Ge	nius, b	oulletin board, Y.S. w	eb page, etc.)
Ţ	On my	own (ev	vents arranged	d on your own (do not cou	unt for N	IHS or	· BIA)	
Orga	anization N	Name: _							
Sumi	mary of D	uties:							
Supe	ervisor's N	ame (co	ntact person):	·					
Supe	ervisor's Pl	none:		Ema	ail:				·
Pos	ard have	rs hara	long organ	ization per s	hoot):				
Month	Date	Year	# Hours	Agency Signat				Student Signature	
	Total Hou	re							
	Total Hou	15							
				Volunte	er Servic	e Refle	ection	1	
1. How	much did	you lear	n about yours	elf and/or thos	e being se	erved du	ıring tl	his volunteer opportu	ınity?
NI-4	1 2	3		5 6	7	8	9	10	
Not a	it all		Son	newhat				A lot	
2. How									l/or those being served?
Not a	1 2 ntall	3		5 6 newhat	7	8	9	10 A lot	
			5511						