



2018-2019  
Andover High School  
Verification of Volunteer Hours

**ALL STUDENTS:**  
Student ID # \_\_\_\_\_  
Grade: \_\_\_\_\_  
Graduation Year: 20 \_\_\_\_\_

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

Teacher recorded \_\_\_\_\_  
Logged by YS \_\_\_\_\_

Where do you want the credit for this volunteer service? (CHOOSE ONLY ONE)

- Civics/Us Govt & Politics: Teacher \_\_\_\_\_ Tri \_\_\_\_\_ Period \_\_\_\_\_
- National Honor Society
- Key Club
- Not part of a school club, group, team, class \_\_\_\_\_
- AVID
- Other club, group, team (please indicate name) \_\_\_\_\_

How did you learn about and/or sign up for this opportunity?

- Through the Youth Service Program at school (ie Sign-up Genius, bulletin board, Y.S. web page, etc.)
- On my own (events arranged on your own do not count for NHS)

Organization Name: \_\_\_\_\_

Summary of Duties: \_\_\_\_\_

Supervisor's Name (contact person): \_\_\_\_\_

Supervisor's Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Record hours here (one organization per sheet):

Month	Date	Year	# Hours	Agency Signature	Student Signature
Total Hours					

**Volunteer Service Reflection**

1. How much did you learn about yourself and/or those being served during this volunteer opportunity?

1    2    3    4    5    6    7    8    9    10  
Not at all                          Somewhat    A lot

2. How much did your involvement in this volunteer opportunity have a positive impact on you and/or those being served?

1    2    3    4    5    6    7    8    9    10  
Not at all                          Somewhat    A lot