BCS National Honor Society

Community Service Hours

Name of BCS NHS/NJHS Member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Description of Service Activity/Place of Service** | **Hours** | **Signature of Contact Person** | **Phone number for Contact Person** |
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| **Total**  **Hour completed** |  |  |  |  |

**BCS National Honor Society Service Guidelines**

**VOLUNTEER HOURS -- BASIC INFORMATION:**

• All NHS members must complete 10 hours (minimum) of community or school service hours.

• All NJHS members must complete 6 hours (minimum) of community or school service hours.

• Community service hours must be completed between Induction Ceremonies from year to year.

• Community service hours earned at BCS and/or non-profit organizations may be documented and used for this program as long as they meet current NHS guidelines.

**VOLUNTEER HOURS -- LIMITATIONS:**

• Community service hours recorded for helping individuals or families in the community must show documentation of the extenuating circumstances. You must have sponsor approval before participating in these types of service activities.

• Participations in walk-a-thons, bike a thons, marathons, etc. to raise money for a non-profit organization will be limited to the time it took to complete the course (usually 2 service hours).

• Student community service organizations may count only their community service hours. You may not count required activities from other organizations you are in.

• Students may not include hours for any activity for which pay is received.

• Volunteer hours will not be accepted from immediate or extended family members. This includes working in the home or at the parent’s place of employment (or classroom), unless for a charity event.

• No more than 12 hours per day may be counted.

**HOURS DOCUMENTATION:**

•Date—Write the date when the volunteer work was completed.

**•**Description of service activity and place of activity--Provide the full name of the organization and event where you volunteered. Describe in detail what work you performed at this activity.

• Hours -- For each day of your activity, enter the number of hours you volunteered.

•Signature—Contact person MUST provide signature to verify your service.

• Contact Information -- Print name and phone number or name and email of the contact person.

• Submit ALL service hours beyond NHS minimum requirements.