



**Winston Churchill High School
National Honor Society Service Hours Form**

Student's Name: _____

Grade: _____ Student ID #: _____

Date of Service: _____ Hours Completed: _____

Service Organization Name: _____

Check here for Churchill NHS Sponsored Event

Description of Service: _____

Sponsor Name: _____

Sponsor Signature: _____

Sponsor Contact Information: _____

- Please attach any supporting documentation
- Please see Mrs. Chance or Mr. Reinhard with questions

Remember, to remain in good standing, NHS members are required to complete 10 service hours per semester, five per nine-weeks.



**Winston Churchill High School
National Honor Society Service Hours Form**

Student's Name: _____

Grade: _____ Student ID #: _____

Date of Service: _____ Hours Completed: _____

Service Organization Name: _____

Check here for Churchill NHS Sponsored Event

Description of Service: _____

Sponsor Name: _____

Sponsor Signature: _____

Sponsor Contact Information: _____

- Please attach any supporting documentation
- Please see Mrs. Chance or Mr. Reinhard with questions

*Remember, to remain in good standing, NHS members are required to complete 10 service hours per semester, five per nine-weeks..