



National Junior Honor Society
Philippians Chapter
Heritage Christian Academy

NJHS Community Service Verification

Last Name: _____ First Name: _____

Grade (current): _____ Semester (check one): First Second

The National Junior Honor Society is an organization dedicated to fostering high standards of scholarship and leadership through service to the school and community. The Heritage Christian Academy – Philippians Chapter provides for these goals through active membership and service. Once inducted, members are required to earn a minimum of **3 service credits** devoted to volunteering per academic year. Two service credits may be earned via chapter-sponsored events, but one credit should be earned through external volunteer service. Please note, new inductees only need to earn 1 service credit by the end of the school year either through external volunteering or through a chapter-sponsored event.

One credit is equal to 10 hours of external community service or active leadership in one chapter-sponsored service project.

External volunteer service may include tutoring students or working for a charitable organization (without pay). Hours may be counted if completed any time in the last 6 months. When volunteering along with a family member, the service must be for a recognized nonprofit group (civic organizations or events, church, etc.). If there are **ANY** questions about the validity your anticipated service participation, ASK!

This service requirement should not be viewed as a chore or undesirable responsibility. Rather, it should be looked upon as an *opportunity* to share your talents and abilities with others.

Please provide the number of hours completed and a **brief description** of your service in the space below. Complete one verification form for each project/service activity in which you participate. **Note:** Verification forms do not need to be submitted for projects sponsored by the chapter where attendance/hours are recorded.

HOURS: _____

DESCRIPTION OF SERVICE PERFORMED: _____

Verification: Please obtain the signature of your supervisor or other adult verifying this service.

Supervisor's name (please print): _____

Student's Name: _____ has completed the service described above.

Signature: _____

Title or organization: _____

Date of Service: _____ Contact phone # or e-mail: _____

Submission: Submitted to the NJHS Chapter Adviser on (date): _____