

NAME _____

GRADE _____

- * Service at SLHS may only count for 10-hours maximum (20-hours maximum for seniors).
- * Service hours may not include hours required/expected by other clubs, athletics or fine arts organizations.
- * There is a 30-hour maximum per service activity or recurring event.
- * There is a 12-hour daily limit for earning hours.
- * Include ALL service hours, even those earned beyond SOS minimum class-level requirements.
(Example: You served the SOS maximum 30 hours working at the food bank, however actually served 40 hours in total - record both as shown below.)

- * The documented service hours must come from at least two sources or separate events.
- * Fundraising activities for any organization, where the student is a member, do not count (SLHS or Community).
- * Provide the full name of the organization or event where you served. Do not use acronyms unless you define them first - see s
- * You must have verification names and phone numbers for all service performed.
- * Provide details of how you served, i.e. what did you do, how did it help others?
- * Make sure to secure this sheet inside a 3 fastener folder when turning it in so it does not get lost.

| Date(s) or Date Range | Where I served: (Use full names, no acronyms) | SOS Eligible | Name of adult who can verify service |
|--|---|----------------------------|--|
| | How I served: (What I did / How it helped others) | Total/Activity | Phone number of adult who can verify service |
| <i>Sample</i> 08/03/2008 - 12/14/2008 | Where I served: Katy Christian Ministries / KCM | SOS: 30 | Name of adult who can verify service: Suzy Q. Volunteer, KCM Pantry Manager |
| | How I served: Worked at the food bank organizing food donations onto pantry shelves so that needy families can select food easily. | Total this activity: 40 | Phone#: (555) 555-5555 |
| | Where I served: | SOS: | Name of adult who can verify service: |
| | How I served: | Total this activity: | Phone#: |
| | Where I served: | SOS: | Name of adult who can verify service: |
| | How I served: | Total this activity: | Phone#: |
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| | Where I served: | SOS: | Name of adult who can verify service: |
| | How I served: | Total this activity: | Phone#: |
| TOTAL SOS ELIGIBLE SERVICE HOURS | | SOS: | <i>Continue on additional pages if needed . . .</i> |
| TOTAL ALL SERVICE HOURS | | TOTAL: | [Total each page : Grand Total goes on your folder cover sheet when turning hours at year end] |