| For Office Use Only |
|---|
| Date Received_____ |
| Signature_____ |

**MERIT AWARD VOLUNTEER**
**HOURS RECORD**

STUDENT NAME_____
PHONE_____
SCHOOL_____
YEAR OF GRADUATION_____

**This form is due by April 15th of your graduation year**

| Date Worked | Description of Service | Location | Time Volunteered (in hours) |
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Total volunteer hours from this page _____
Total volunteer hours from back of page _____
TOTAL VOLUNTEER HOURS (40 hours are required) _____

Student Signature_____ Date_____

Parent Name (print)_____

Parent Signature_____ Date_____

**This form is due by April 15th of your graduation year**

| Date Worked | Description of Service | Location | Time Volunteered (in hours) |
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Total hours from this page ____________________

(Record these hours on front page to be included in total hours)