Pine Island Academy				
Record of Service for (check one):	By our signatures, we attest that the hours recorded are accurate.			
○ Semester 1 (Due January) ○ Semester 2 (Due May)	Student Signature			
Semester 2 (Buc Way)	Darant Cignatura			

NJHS Service Hours Documentation Form

Name_____

This form is to be submitted at the times of the year listed above. Documentation must include a description of the activity, the date(s) of participation, hours involved for each date, and the supervising adult's legible signature and phone number. An additional page may be attached if necessary, but must also include the required information. Before submitting the form, complete the **Reflection** on the back of this page. *Please keep a copy of this form for yourself in case a discrepancy arises*.

Date(s)	Volunteer Activity & Name of Not-for-Profit Organization	Hours	Supervisor's Printed Name & Job Title	Supervisor's <u>Signature</u> , <u>Phone</u> & <u>Email</u>
Example: 6/12/20	I read the newspaper to residents at Green Meadow nursing home.	2.0	Jane Smith Volunteer Coordinator	Jane Smith 727-555-0010 jane@gmnh.org

Total	Hours:	

The reflection on the back of this page must be completed in order for your hours to count.

REFLECTION

This reflection is the conscious review and critical analysis of the service performed. Reflection gives meaning to

the service. It asks you to move beyond the task you did, broaden your world view, and consider your personal value system. Respond to these three prompts in the space provided. What did you do? How were you providing a service? What did the experience mean to you or what did you learn from your experience? Did you learn anything about a social issue? How can you or how will you use the lessons learned from this experience? Is there something more you could do?

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