



BHS Code of Conduct Community Service – Verification of Hours

Student's Name _____ Date of Service _____

Brief Description of Service: _____

Thoughtfully reflect about the community service you performed, and complete the following questions:

Describe what you learned by doing this community service: _____

What are the benefits to those who received the community service: _____

Actual Time Spent by Student on Service: _____ Hours _____ Minutes

Supervisor's Signature

Phone Number

Parent's Signature

Phone Number

School Administrator's Signature

Date

Number of Hours Verified: _____ Total Points Deduction: _____

One hour of community service = 5 point deduction