HILTON HEAD ISLAND HIGH SCHOOL
COMMUNITY SERVICE RECORD

Student Name__________________________________________ Date________________

Please Print

Supervisor__________________________________________ Grade_____

Supervisors Service Agency__________________________________

Dates of Service Assignment_________________________ Hours Worked________________

Program to which hours should be applied

(To be completed by the student) Write a clear description of your personal participation in this service activity, reflect on:

• The extent to which you have personally developed as a result of the activity
• The benefit that you consider the activity was, or may be, to others
• The understanding, skills, and values that you have acquired - how have you: • become more aware of your own strengths and areas for growth • undertaken challenges that develop new skills • discuss, evaluate and plan student-initiated activities • persevered in action • worked collaboratively with others • developed international-mindedness through global engagement, multilingualism and intercultural understanding

Signature of Student__________________________________

I verify that ____________________________ has successfully completed the duties assigned to him/her and deserves ____________________________ hours of community service/volunteer credit, which may be used toward satisfying the requirements of one of the following programs:

HONOR SOCIETIES, ROTC, BETA CLUB, INTERACT CLUB, INTERNATIONAL BACCALAUREATE, MAYORS AWARD

Signature of Agency Supervisor: ____________________________ Date________________

PLEASE RETURN A COPY OF THE COMPLETED FORM TO MS. O’SULLIVAN FOR OFFICIAL SCHOOL RECORD

Hilton Head Island High School 70 Wilborn Rd Hilton Head, SC 29926