

Viking Chapter of the



National Honor Society *Service Hours*

Validation Form

Name of Member: _____

Date(s) and Number of Hours of Activity:

Organization/Group you volunteered with:

Did this activity coincide with another school club or organization? Which one?

Nature of Activity (what were you actually doing or accomplishing)

Does this benefit the organization/school/community? Please give a brief description as to how.

Signature of Organization/Group Officer: _____