



## Student Service Tracking Form

This form will be used to record your volunteer service hours for the President's Student Service Award. **Your supervisor must sign this form to validate your volunteer hours.** Be sure to include all volunteer service hours such as school, church, clubs, civic organizations, and individual service.

| <b>Eligibility:</b> | <u>Age</u>                   | <u>Category</u> | <u>Hours</u> |
|---------------------|------------------------------|-----------------|--------------|
|                     | Up to 14                     | Bronze          | 50-74        |
|                     | Up to 14                     | Silver          | 75-99        |
|                     | Up to 14                     | Gold            | 100+         |
|                     | 15+                          | Bronze          | 100-249      |
|                     | 15+                          | Silver          | 250-499      |
|                     | 15+                          | Gold            | 500+         |
|                     | Families/Groups              | Bronze          | 200-499      |
|                     | Families/Groups              | Silver          | 500-999      |
|                     | Families/Groups              | Gold            | 1,000+       |
|                     | All (earned over a lifetime) | Call to Service | 4,000        |

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Age \_\_\_\_\_  Male  Female

School \_\_\_\_\_ Grade \_\_\_\_\_

The activities listed on the reverse fall into the following service classifications (check all that apply):

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Community Improvement             | <input type="checkbox"/> Environment        | <input type="checkbox"/> Literacy and Education |
| <input type="checkbox"/> Disaster Relief                   | <input type="checkbox"/> Health             | <input type="checkbox"/> Youth Serving Youth    |
| <input type="checkbox"/> Public Safety/Violence Prevention | <input type="checkbox"/> Elderly Assistance | <input type="checkbox"/> Hunger & Homelessness  |
| <input type="checkbox"/> Church                            | <input type="checkbox"/> Other _____        |   |

*I certify that the information provided on this form is accurate to the best of my knowledge.*

Volunteer Signature \_\_\_\_\_ Date of submission \_\_\_\_\_

Forms must be returned to the Volunteer Center of Morgan County by **March 30, 2005**

Volunteer Center of Morgan County  
 708 Sixth Avenue SE  
 Decatur, AL 35601  
 Phone: (256) 355-8628  
 Fax: (256) 355-8726

