

Milford ISD
National Honor Society / Bulldog Pride



Documentation for Community Service Hours

Date: _____

Student Name(s): _____

Description of activity: _____

Time Spent on Activity: (rounded to the nearest 1/2 hour) _____

Printed Name of Supervising Adult: _____

Signature of Supervising Adult: _____

Return to Mr. Chambers within 10 days of the event!

