**PRESIDENT’S VOLUNTEER SERVICE AWARD**

**Student Tracking Form 2016-2017**

**Please print, complete, and return to Ms. Gorton by Monday, March 20, 2017**

**Voorhees H.S.:** Inside the Athletic & Student Activities Office; **North Hunterdon H.S.:** Inside the Guidance Office

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| --- | --- | --- | --- |
| **First Name:** | **MI:** | **Last Name:** | |
| **The grade you are in:** | **Age:** | **DOB (M/D/Y):** |  |

**What is the President’s Volunteer Service Award?**

The President’s Volunteer Service Award recognizes individuals, families, and groups that have achieved a certain standard – measured by the number of hours of service over a 12-month period. You may include service hours that took place between **March 21, 2016 and March 20, 2017**.

**Eligibility Criteria:**

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| --- | --- | --- | --- |
| **Hours by Award** | **Bronze** | **Silver** | **Gold** |
| **Teens (11–15)** | 50 – 74 | 75 – 99 | 100 + |
| **Young Adults (16-25)** | 100 – 174 | 175 – 249 | 250 + |

Students must demonstrate volunteer service and civic participation to apply for this award opportunity. This does not include service you have been paid to complete.

**Please note:** only include hours that you were working. For example, each day of a mission trip equals about 6-8 hours, not 24 hours.

**Instructions for filling in volunteer** **hours:**

* The **Start to end dates** of your service
* **Activity**: What the service was
* **Description**: A brief sentence describing your service
* **Location:** Where the service was conducted
* **Signature of** **Verification:** To receive credit for your volunteer work, you must produce a signature from a club advisor, coach, or teacher that can verify your hours.
* **Total:** You must total all of your hours at the end of the application

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| **Start to End Dates** | **Volunteer Service** | **No. Hours** | **Contact Number –**  **(xxx-xxx-xxx)** |
|  | **Activity:**  **Description:**  **Location:**  **Signature of Verification:** |  |  |
|  | **Activity:**  **Description:**  **Location:**  **Signature of Verification:** |  |  |
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|  | **Activity:**  **Description:**  **Location:**  **Signature of Verification:** |  |  |
| **Total Number of Hours from March 21, 2016 – March 20, 2017** | |  | |

**CERTIFICATION STATEMENT:**  I certify the above information is accurate and true.

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_