



IKCA National Junior Honor Society

MEMBER SERVICE RECORD

Name (Last, First) _____

Quarter 1 2 3 4

Date	Hours Worked	Explanation (What did you do?)	Sponsor Signature	NJHS officer signature AT MEETINGS ONLY

Extra Hours if needed

Date Assigned/# of hours to be completed	Date Completed	Hours	What did you do?	Sponsor Signature	Officer Signature AT MEETINGS ONLY