

NHS Service Hour Request and Confirmation Form

- I. In order to ensure credit, this section is to be completed BEFORE performing any activity. If you complete the activity prior to approval, you don't have a leg to stand on if Mr. Frew thinks the activity shouldn't count as service.

Name: _____

Activity (clearly explain what you'll be doing):

Supervisor: _____

Expected Hrs. _____

Date(s) of Activity _____

NHS Advisor's Signature _____

- II. This section is to be completed by the supervisor at the activity.

Date: _____

Hrs. completed: _____

Supervisor's Signature _____

Phone Number _____