

SERVICE HOURS AUTHORIZATION REQUEST
For Service Credit Not Related to Junior Beta Activity

Student Name: _____ Date Submitted: _____

Date of Event: _____

Name of Organization Being Served: _____

Brief Description of Activity (must include explanation of how this event fits the profile of Junior Beta activities):

Number of Service Hours Requested (max of 15 per year): _____

Signature and Phone Number of Parent: _____

Signature of Approval by Junior Beta Parent Sponsor: _____
(Required prior to event)

*Save this form and after the event have the bottom portion completed by the event supervisor
and then submit to Beta Club.*

COMPLETION VERIFICATION SECTION
For Service Credit Not Related to Junior Beta Activity

Number of Service Hours Completed: _____

Name of Supervisor: _____

Signature of Event Supervisor: _____

Event Supervisor: Please provide the Junior Beta Club Sponsors with any feedback about the quality of service provided to your organization by our students. Thank you.

Signature of Student: _____

Signature of Parent: _____