**2020 North Carolina Retired School Personnel**

**Individual Community Service Hours Record**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Local Unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Region: \_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Category | Jan | Feb | March | April | May | June |  | Totals |
| Education |  |  |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |  |  |
| **Totals** |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Category | July | Aug | Sept | Oct | Nov | Dec |  | Totals |
| Education |  |  |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |  |  |
| **Totals** |  |  |  |  |  |  |  |  |

\*Volunteer hours for the “Other” category would include the following activities.

*Please circle the ones in which you participated.*

• Political • Companion to shut-in • Transport others • Governmental

• Mentoring • Neighborhood • Non-profit group • Mission work

• Civic organization • Church/Religious work • Healthcare/Medical Volunteer

**Notes:**

* Activities for which you are paid (including honoraria or stipends) **do not** count for volunteer hours.
* While the NCRSP Executive Board considers time spent caring for grandchildren, elderly parents or other family members as very important, these activities are considered to be family obligations and the Board does not accept these hours as volunteer hours.
* **Forms must be received on or before the due date for hours to be counted.**

**NO EXCEPTIONS**

**Submit this completed form to your Local Unit’s Community Participation Chair by January 8, 2021.**