## LIONS YOUNG LEADERS IN SERVICE AWARDS YOUTH SERVICE TRACKING FORM

For use by participating young people



Lions Clubs International and your local Lions club are recognizing young people for their service to the community. Use this form to record your service hours. Return the completed form to the adult leader of your school or youth group.

50 hours of community service = Silver Seal Award 100 hours of community service = Gold Seal Award

FIRST (GIVEN) NAME				AST (FAMILY) NAME		
STREET ADDI	RESS					
CITY					STATE/PROVINCE	POSTAL CODE
TELEPHONE		E-MAIL			AGE	☐ MALE ☐ FEMALE
Date(s)		Service Activity	Service	e Category Code*	Place of Service	Hours
					TOTAL HOURS	
		SORY CODES se the following codes t	o indicate	the category o	f service for each a	ectivity:
<ul> <li>1 - Environment</li> <li>2 - Public Health</li> <li>3 - Safety</li> <li>4 - Literacy and Education</li> <li>5 - Disaster Relief</li> <li>6 - Community Improve</li> </ul>			8 - Help Elderly People		10 - Other	
I certify the	nat the abo	ove information is accur	rate.			
YOUTH SIGNATURE						
PARENT/GUARDIAN SIGNATURE					DATE	

## **LIONS YOUNG LEADERS IN SERVICE AWARDS**

## SCHOOL/YOUTH GROUP AWARD CERTIFICATION FORM



For use by the school/youth group adult leader

	return it to your Lions club represent t right. Please type or print using bla	Deadline				
Please make sure all info	rmation is legible. Lions Clubs Intern to issue letters and certificates for aw	ational will	Return to:			
recipients.			LIONS CLUB AWARD CHAIRPERSON			
School, Leo Club or Yo	uth Group Information	LIONS CLUB NAME				
			ADDRESS			
NAME OF SCHOOL, LEO CLU	IB OR YOUTH GROUP		TELEPHONE E-MAIL			
NAME OF ADULT LEADER			TELET HONE	IVIALE		
TITLE						
ADDRESS						
TELEPHONE		FAX	E-N	1AIL		
Awards Certification I certify that the informa	tion provided is complete and accura	te.				
ADULT LEADER'S SIGNATURE			DATE			
Complete the followin Lions Young Leaders	g information for each student o in Service Awards.	r youth grou	p member who qualifie	es to receive the		
Youth Information						
FIRST (ONEN) MANE		LACT (FAMILY)				
FIRST (GIVEN) NAME	ST (GIVEN) NAME  LAST (FAMILY) NAME					
STREET ADDRESS						
CITY			STATE/PROVINCE	POSTAL CODE		
TELEPHONE	E-MAIL		AGE	— □ MALE □ FEMALE		
	☐ Silver Seal Award (50 service hours☐ Gold Seal Award (100 servi		-			
	hours in each service category as reportegories in which the youth served.)	orted on Youth	n Service Tracking Form. (	Please fill in number		
1 - Environment	4 - Literacy and Education	7 - Help C	Children 10 - 0	Other		
2 - Public Health	5 - Disaster Relief	8 - Help E	Elderly People	LIONS		
3 - Safety	6 - Community Improvement _	9 - Help H	Homeless/Hungry People			