



# NHS SUMMER PROJECT FORM



- This form must be submitted to the NHS sponsor by 2:30 p.m. on FRIDAY OF THE FIRST WEEK OF SCHOOL
- Include the following info
  - Project information sheet completed in full with verifying signatures (THIS FORM)
  - Log (dates, times, and exactly what you did for each entry)
  - Pictures and any other supporting information

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

Grade: \_\_\_\_\_

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

Project Overview: \_\_\_\_\_

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How did you come up with the idea for your project? What **community need** does your project fulfill? \_\_\_\_\_

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How were people impacted by your project? (Be SPECIFIC)

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How could you expand this project to have a greater impact?

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What did you learn by doing the project (new insights and skills)?

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How many total hours did you spend on this project? \_\_\_\_\_

Other information regarding your project:

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I verify that all information contained on this form and all hours in my project log is accurate and not misrepresented in any way. I certify that I have met all of the criteria for this NHS summer project.

Student Signature: \_\_\_\_\_

I verify that, to the best of my knowledge, the information provided by the student is correct.

Name (must be someone other than the parent/guardian): \_\_\_\_\_

Organization: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_