



COMMUNITY INVOLVEMENT ACTIVITIES

STUDENT: _____
Surname Given name

PRINCIPAL: _____

SCHOOL: _____

TELEPHONE: _____

Activity	Number of Hours	Date of Completion	Location & Telephone #	Supervisors Name & Signature (indicating completion)	Parent/Guardian Signature (indicating completion)
1					
2					
3					
4					

PLEASE NOTE: Every activity listed above must be included in the school *List of Eligible Activities* which appears in the *Community Involvement-Questions and Answers* brochure.

For Office use only:

Completion has been noted in the student's O.S.R.

Signature of School Official

Student Signature

Date

Parent/Guardian Signature