

## Completion of Community Involvement Activities

|         |                |           |
|---------|----------------|-----------|
| Student | Student Number | Principal |
| School  |                | Telephone |

Please submit this form to the school when you have completed 40 hours of community involvement activities or when the principal requests it.

| Activity     | Number of Hours | Date of Completion  | Location and Telephone Number | Supervisor's Name | Supervisor's signature |
|--------------|-----------------|---|-------------------------------|-------------------|------------------------|
|              |                 |   |                               |                   |                        |
|              |                 |   |                               |                   |                        |
|              |                 |   |                               |                   |                        |
|              |                 |   |                               |                   |                        |
|              |                 |   |                               |                   |                        |
| <b>Total</b> |                 | For office use only:<br><br><input type="checkbox"/> Completion of hours noted on student's OST<br><br><hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Signature of school official<br>Date |                               |                   |                        |

\_\_\_\_\_

\_\_\_\_\_

Student's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's/Guardian's signature Date \_\_\_\_\_

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| This information is collected under the authority of the Education Act and the Ontario Student Records Guideline (1989). |
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