Completion of Community Involvement Activities

Student _____ Curre ade _____ Principal _____

School _____ Telephone _____

Students must complete 40 hours in order to meet OSSD requirements. Please submit this form to Mrs. Moreau in Guidance when you have community involvement activities recorded and signed. You **do not** have to have all 40 hours completed to hand in the form.
Please write legibly and complete all information.

	Number of hours	**Start Date End Date**	**Location and telephone number**	**Supervisor's name and signature**
Total				

_____ _____ _____
_
Student's signature Date Parent's or guardian's signature

For office use only
q Completion has been noted on the student's OST

_____
Signature of school official