

Phone: (416) 368-2882 Fax: (416) 955-0023

Community Involvement Activity Notification and Completion Sheet

Student name:

Student number:

Instructions: Please provide the information requested below about the community involvement activities in which you plan to participate. Is each activity identified on the school's list of approved activities? If "Yes," see Guidance for approval; if "No," you must obtain written approval from the principal before starting the activity.

Assessed hours Guidance signature for approval:

Each record must include all information requested and must be signed by the person supervising the activity, otherwise the hours will not be recognized.

Brief Description of Activity	Total Hours Completed	Date of Activity	Name of Organization	Supervisor Phone Number and Email Address	Supervisor Name and Signature	Office Use Only	
						Guidance Signature	P/V.P. Signature

Please submit this form to the school when you have completed the community involvement activities described above.

Student signature: Parents or guardians signature: Date:

NOTE: Personal information on this form is collected under the authority of the Education Act and Municipal Freedom of Information and Protection of Privacy Act, and will only be used to document completion of community involvement hours. The information on this form is confidential and access will be limited to those employees who have an administrative need, the student, and parent(s)/guardian(s) of a student who is under eighteen years of age.