

# NOTIFICATION OF PLANNED COMMUNITY INVOLVEMENT ACTIVITIES

TO BE USED IN CONJUNCTION WITH THE INFORMATION MANUAL

Student: \_\_\_\_\_ Principal: \_\_\_\_\_

School: \_\_\_\_\_ Phone: \_\_\_\_\_

Activity	Estimated number of hours	Estimated date of completion	Location	Phone number	Supervisor's name (please print)	Principal's signature (if required)

Is each activity identified on the School Board's list of eligible activities? Yes  No  If "No", Principal's written approval (signature above) must be obtained before starting activity.

\_\_\_\_\_  
Student Signature Date Parent/Guardian Signature (if student is not 18 or older) Date

## COMPLETION OF COMMUNITY INVOLVEMENT ACTIVITIES

Activity	Number of hours	Date of completion	Location	Phone number	Supervisor's name (please print)	Supervisor's signature

TOTAL HOURS:

\_\_\_\_\_  
Student Signature (Homeroom) Date

\_\_\_\_\_  
Parent/Guardian Signature (if student is not 18 or older) Date

**FOR OFFICE USE ONLY:**  COMPLETION HAS BEEN NOTED ON STUDENT'S OST

\_\_\_\_\_  
SIGNATURE OF SCHOOL OFFICIAL DATE