

# COMMUNITY INVOLVEMENT

## LOG FORM

Please Return To:



2665 Ness Avenue Winnipeg, MB R3J 1A5

School Year \_\_\_\_\_

School \_\_\_\_\_

Student Name \_\_\_\_\_

Total Accumulated Hours

as of \_\_\_\_\_

(Date)

(Hours)

Community Involvement Activity (Give specifics)	No. of Hours	Name of Person or Organization Receiving the Activity	Date(s)	Confirmed by (Supervisor's Signature)	Parent Signature	Student Signature