

Community Involvement Activity Record Form

Student Name: _____ Student Number: _____ School: _____

Please provide the information requested below about the volunteer activities you have participated in. Ministry of Education guidelines have established eligible and ineligible activities. Students and parents/guardians can visit www.peelschools.org/students/40hours to identify eligible activities.

| Organization | Contact Name | Contact Email | Description | Start Date | Completion Date | Total Hours |
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TOTAL Hours

Student Signature: _____ Date: _____ Parent/Guardian Signature: _____ Date: _____

For office use only.

Date received: _____ Entered in SIS

Principal or designate _____