Simcoe Muskoka Catholic District School Board

Community Involvement Notification & Activity Completion Sheet

Student Name: _____ Principal: _____

School: _____ Telephone: _____

Please submit this form to the school yearly or when you have completed 40 hours of Community Involvement Activities, or when the Principal requests it.

Description of Activity	Number of Hours	Date of Activity	Location & Telephone Number	Community Sponsor's Name	Community Sponsor's Signature	Principal/Designate Signature (if required)
Total						

_____ _____
Student Signature Date

_____ _____
Parent/Guardian Signature Date
(if student is under the age of 18)

For Office Use Only:

☐ 40 hour requirement is complete and has been noted on the student's Ontario Student Transcript.

_____ _____
Signature of Principal/Designate Date

NOTE: Personal information on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act and will be used for the purpose of administering the Community Involvement Program. This information will be stored in the Ontario Student Record, O.S.R. Users: Teacher Advisor, Community Sponsor, Principals. Copies (upon request): 1. Parent/Guardian; 2. Student; 3. Ontario Student Record O.S.R. Questions about this collection should be directed to the Superintendents of Education for either the Elementary or Secondary panel.