Completion of Community Involvement Activities

Student's Name: _____

Principal's Name: Parastou Ziadlou

Address and Telephone Number

_____

_____

Eenchokay Birchstick School

71 School Road,
Pikangikum, ON,
P0V2L0
(807)-773-5561

Please submit this form to the school when you have completed 40 hours of community involvement activities, when the principal requests it or when this sheet is full.

Activity	Number of Hours	Date	Location and telephone number	Supervisor's name and signature
Total				

FOR OFFICE USE

☐ Completed hours noted on OST

_____

Signature of School Official Date

Student's Signature _____ Date _____

Parent's Signature _____Date _____