OFFICE USE ONLY
Previous Hours: _____
Total Accumulated Hrs: _____
As of: _____
Init: _____

WESTWOOD COLLEGIATE
COMMUNITY INVOLVEMENT ACTIVITY
LOG FORM

STUDENT NAME: _____ Grade Level_____

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

Total: _____

Administration
Signature: _____