

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: _____