



BRANT HALDIMAND NORFOLK CATHOLIC DISTRICT SCHOOL BOARD

COMPLETION OF COMMUNITY INVOLVEMENT ACTIVITIES

Note: Check with your guidance counsellor to ensure that your planned community service hours will be acceptable.

OFFICE USE ONLY ☐ Completion entered in Student Record

Signature of School Official

Date

Student: _____

Principal: Mr. Humberto Cacilhas

School: Holy Trinity Catholic High School

School Telephone: 519-429-3600

Students are encouraged to submit this sheet to Student Services as soon as they complete hours.

Name of Organization, Charity or Activity and a brief description of your duties	Start Date	Date Completed (month/day/year)	No. of Hours Completed	Location and Telephone	Supervisor's Name (please print) and Signature
<i>Example – HT Student Council, Fair painting (after school)</i>	<i>October 2/24</i>	<i>October 2, 2024</i>	<i>2</i>	<i>Holy Trinity, Simcoe ON 519-429-3600</i>	<i>John Henry John Henry</i>
Total Hours					

**** The boxes above are required information. Form must include student name and parent signature (if under 18). Incomplete sheets will not be accepted.**

Student Signature: _____ Parent/Guardian Signature: _____

Date: _____ Date: _____

The information contained on this sheet may be privileged or confidential where disclosure or use by persons other than the intended recipient may result in a breach of applicable laws or infringement of third-party rights.