



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: Mrs. Tara Williams

School: Holy Trinity Catholic High School

Telephone: 519-429-3600

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

**** The boxes above are required information. Form must include student name and parent signature (if under 18)**

Student Signature: _____ Parent/Guardian Signature: _____

Date: _____ Date: _____

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