

Student:		Home Phone:		<b>Return completed forms to Traci Dixon in the Attendance Office at ISS or email to <a href="mailto:tadixon@scdsb.on.ca">tadixon@scdsb.on.ca</a></b>
School:	Innisdale Secondary School 705-726-2552	Principal:	Mr. Brian MacIsaac	

Activity	Approved Activity Y/N*	# Hours	Completion Date MM/DDYY	Community Organization or Location	Sponsor's Contact xxx-xxx-xxxx	Sponsor's Signature
<b>Total Hours Submitted</b>						

Student Signature:		Date Submitted:	
Parent/Guardian Signature:			

\*If the activity is not on the list of approved activities students require the principal's signature/initials before starting the activity.

OFFICE USE ONLY	Completion has been noted on the student's transcript	<input type="checkbox"/>
	Signature of school official:	