



Work Hours Record Form 2023 - 2024
Keep this form until 15 hours are completed.

Parents Name(s): _____

Child(ren)'s Name(s): _____ Teacher's Name(s): _____

Date	Event	# of Hours	(Signature Required) Approved by: (Teachers, Board Members, Parent Club officers, or Administration).

Upon completion of hours, please turn this form into the office and your account will be credited.

Note: This form must be received in the office no later than July 31, 2024.

Date Credited: _____

By: _____