

## PARENT PARTICIPATION LOG

For the Month of \_\_\_\_\_

		SUBMITTED BY	*** TE ***		
amily Name:					
Oldest SJ Student's Name:			Grade:		
Date	Name of Person Performing Service	Activity Performed or Service Performed (please be specific)  Round hours to 1/4 hours (.25, .5, .75, 1.0)	# of SJS Hours	# of CYO Hours	# of Parish Hours
Total Hours	I	Subtotals			
•	Parent Signature:				
	<u>-</u>				
	REMINDER:	Must be submitted by			