The Sagemont School
Upper School Campus
Middle School Community Service

Project Activity Log

Student's Name: _____ Grade: _____

All students must use the activity log to record their community service activities. Use additional sheets as needed.

Date	Community Service Activities	Hours Completed	Supervisor's Signature

Total Project Hours_____

I have reviewed my son/daughter's Project Activity Log and understand that a community service project must be completed each year in order to meet the graduation requirements for The Sagemont School, Upper School Campus.

Parent/Guardian's Signature: _____

Student's Signature: _____

Science Teacher's Signature: _____