

PHYSICAL EDUCATION 12
Ms. Wong-Moon

SERVICE LOG

Name: _____

Block: _____

Term: 1 2 3
(Circle one)

DATE	ACTIVITY	HOURS	SUPERVISOR'S SIGNATURE*

Hours completed: _____

Summary of service activities:

On a separate piece of paper, **type** a paragraph explaining your duties. Reflect upon your performance, comment on your experience and share any interesting stories. Please attach this form to your typed paragraph for submission at the end of each term.

On your write-up, please include your supervisor's name, title, and telephone number for contact/confirmation.

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