



Grace
 BAPTIST ACADEMY
Giving • Believing • Achieving

Parent Participation Form

PPF

Each family is required to volunteer 10 hours each school year. Please record time worked in the provided space and return to your child's school office.

Today's Date: _____

Parent's Name: _____ Phone Number: _____

Student's Name: _____

Date Worked: _____

Area of Participation & Explanation:

- Athletics/Boosters _____
- Helping a Teacher _____
- Office of Advancement _____
- GPA _____
- Library _____
- Maintenance _____
- Office _____
- Yearbook _____
- Other _____

Total Hours Worked: _____

*****Attending field trips and lower school parties do not count as volunteer hours.*****

Printed Name of Supervising Attendant: _____

Signature of Supervising Attendant: _____

Office Use Only:		
<input type="checkbox"/> Entered in Renweb	_____ Initials	Date: _____