



Time and Talent Hours

Parent/Guardian Full Name: _____
(If grandparent is working, please print parent/guardian name.)

Student's Full Name: _____
(If more than one child, please print name of oldest student.)

Number of hours worked: _____ Date: _____

Please state what you did: _____

Parent/Guardian Full Name: _____
(If grandparent is working, please print parent/guardian name.)

Student's Full Name: _____
(If more than one child, please print name of oldest student.)

Number of hours worked: _____ Date: _____

Please state what you did: _____

Parent/Guardian Full Name: _____
(If grandparent is working, please print parent/guardian name.)

Student's Full Name: _____
(If more than one child, please print name of oldest student.)

Number of hours worked: _____ Date: _____

Please state what you did: _____

To ensure credit for hours worked, please fill out the form completely and accurately. Return to school with your child for posting.