



**ALL ANGELS ACADEMY**

[www.allangelsacademy.org](http://www.allangelsacademy.org)

Miami Springs, Florida

## Volunteer Hour(s) Completed Form

Please complete the form and then obtain the signature of the appropriate school staff member, PTO board member, or committee chairperson overseeing the activity.

Activity: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Time Volunteered: \_\_\_\_\_ (hours)

Date(s): \_\_\_/\_\_\_/\_\_\_ thru \_\_\_/\_\_\_/\_\_\_

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Volunteer Name (print): \_\_\_\_\_

School/PTO/Committee: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Signature

School/PTO/Committee: \_\_\_\_\_

Name (print)