

Phoebe A. Hearst Elementary School PARENT PARTICIPATION FORM

Student Name		25.55
Room	Teacher	

(3)

Please fill out one (1) form each month. For each activity listed below, the total number of hours your family participated this month and dates. Forms are due the 10^{th} of the following month.

Date				Total Hours
Classroom Assistant				
Home Corrections				
Treats (1 hr for every \$5)				
Field Trips				
Library Assistant				
Office Help				
Parent Workday				
Chair / Committee Member				
Meetings / PTA, etc.				
Sports Day				
School Social Functions				
Open House/Back to School				
Parent/Teacher Conferences				
Yard Duty (double hours)				
Traffic Duty (double hours)				
Donated Item (1 hr for every \$5)				
Donation Dollars (1 hr for every \$5				
- \$100 max per year)				
Clothes Closet (3 hour shifts)				
Other (please explain)			2	