# OACS Volunteer Hours

## Student Info
- **Name:** 
- **Grade:** 
- **Homeroom:** 

## Volunteer Info
- **Name:** 
- **Date Task Completed:** 

## To Be Completed by Teacher or Staff Awarding/Verifying Hours
- **Classroom Support (Materials/Supplies/Time/Effort)**
- **Conference**

- **Name of Teacher Awarding Hours:** 
- **Number of Hours Awarded:** 
- **Teacher Initials:** 

## To Be Completed by PTO Volunteer Coordinator
- **Received:** 
- **Entered:** 
- **Date**
- **Entered:** 
- **Date**
- **Coordinator:**

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- **Name of Teacher Awarding Hours:** 
- **Number of Hours Awarded:** 
- **Teacher Initials:** 

## To Be Completed by PTO Volunteer Coordinator
- **Received:** 
- **Entered:** 
- **Date**
- **Entered:** 
- **Date**
- **Coordinator:**