Summit Technology Academy Student Ambassador Service Hours Form

| Student Name | STA Class/Teacher |
|--------------|---------------------|
| | S111 Clubb 1 Cucite |

| Date | # of minutes | Activity Description | Teacher Name/Room Number | Comment/Note | Staff member Signature |
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^{*}Minimum of 10 Service Hours required for end of the year recognition

Summit Technology Academy Student Ambassador Service Hours Form

| Student Name | STA Class/Teacher | | | |
|-------------------------|-------------------|--|--|--|
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| Total number of minutes | | | | |

^{*}Minimum of 10 Service Hours required for end of the year recognition