



**OFFICE OF STUDENT AFFAIRS AND SERVICES**

Date: \_\_\_\_\_

\_\_\_\_\_  
 NAME OF PARENT/GUARDIAN)

\_\_\_\_\_  
 (Contact Number)

\_\_\_\_\_  
 (Complete Address)

Dear Sir/Ma'am:

*Greetings!*

We would like to inform you that your son/daughter/ward will be participating in a **Community Service** outside the school premises as part of their **NSTP 2: CWTS** requirement. This activity will take place on \_\_\_\_\_ at \_\_\_\_\_, **Tangub City**.

The purpose of this activity is to provide students with hands-on experience in community engagement and civic responsibility. They will be involved in activities that promote social awareness, environmental sustainability, and community development. The students will be supervised by their designated **CWTS Instructor** and other faculty members to ensure their safety and active participation.

We seek your permission for your son/daughter/ward to take part in this meaningful initiative. Please sign the reply slip below and return it to us on or before \_\_\_\_\_. Should you have any concerns, please feel free to contact him/her CWTS Instructor via mobile number **+639469677569**.

Thank you for your support and cooperation.

Very truly yours,

**CHARLIE L. MIPARANUM, JR., MTTE**  
 NSTP, Director

I will allow my son/daughter/ward to join **Community Service** to be held at

\_\_\_\_\_.

I will NOT allow my son/daughter/ward to join **Community Service** to be held at

\_\_\_\_\_

\_\_\_\_\_  
 Signature Over Printed Name of Student

\_\_\_\_\_  
 Signature Over Printed Name of Parent/Guardian

