

**Organization/Department:**

---

**Submitted by:**

---

**Email:**

---

**Phone Number:**

---

**Volunteer Service Description**

**Name of Event:**

---

---

**Description of Service Performed:**

---

---

---

---

---

---

---

**Date of Service:**

---

**Time of Service Project:**

---

**Additional Comments:**

---

---

---



**Volunteers Information**

	Last Name	First Name	Email Address	Hours of Service
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				

Please submit this form to the Office of Community Engagement & New Student Programs  
The Loft Suite 302, Old Gym ~ 347-577-4020