

Club/ Department/Organization:

Submitted by:

Email:

Phone Number:

Volunteer Service Description

Service Site/Organization: _____

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