

# VOLUNTEER HOURS LOG

Organization Name: \_\_\_\_\_

Year: 20\_\_\_\_

Volunteer Name: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Email/Phone: \_\_\_\_\_

Department: \_\_\_\_\_

DATE	DESCRIPTION OF SERVICE/PROJECT	START/END	HOURS	VERIFIER INITIALS
------	--------------------------------	-----------	-------	-------------------

**DATE**

**DESCRIPTION OF SERVICE/PROJECT**

**START/END**

**HOURS**

**VERIFIER  
INITIALS**

**Total Cumulative Hours:**

Volunteer Signature

Coordinator Signature

Date Submitted: \_\_\_\_/\_\_\_\_/\_\_\_\_