

Volunteer and Community Services

Student Sign-In Sheet for Individuals

NAME OF VOLUNTEER (S)	DATE	TIME IN	TIME OUT	HOURS	AGENCY	TYPE OF SERVICE ACTIVITY	AGENCY SUPERVISOR SIGNATURE
(Example) Jane Doe	9/2/14	4:00	7:00	3	CCRM (The Friendly Soup Kitchen)	Serving Dinner	S. L. Smith

Please maintain this log for your records and give a copy to Volunteer and Community Services, Williams Center, S227, at the end of each month. Contact: joyce.smith@fredonia.edu or phone (716) 673-3690

Month of: _____

Total Number of Hours: _____