Print Form

FAMILY PROGRAM VOLUNTEER TIME/RECORD FORM

NAME_____ **UNIT**_____

Please document your volunteer hours below. Include time spent in volunteer meetings, planning, traveling to and from unit, telephoning, working at home on projects, unit activities at which you work, and anything else that falls under volunteering with the Family Program. Forward to Family Program Office the 1st of Jan, April, July and Oct.

Date	Activity/Event	# of hours	Miles

Total Hours_____ **Miles**_____

SDNG FORM 600-12-12R (1 Jan 01)