Beaches Habitat for Humanity®

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VOLUNTEER DOCUMENTATION

Volunteer Information

Name					
Phone #		Email			
Address					
City/Town		State		Zip Code	

Organization Requiring Service Hours

Organization					
Contact Name		Contact #			
Address					
City/Town		State		Zip Code	

Volunteer Hours

Date	Activity/Location	Time In	Time Out	Hours	Supervisor Signature
Total Hours					

THIS FORM DOES NOT CONSTITUTE VERIFICATION OF HOURS!

This form is for tracking purposes only. This completed form should be submitted to Volunteer Services via fax, email or drop off at the office. Please be sure that any request for verification includes information for delivery of the completed letter.

Allow two business days from the time of submitting this request for completion of your letter. Please be aware that letters cannot be generated on Saturday, Sunday or Monday!