



RSVP

Lead With Experience

MONTH: _____ YEAR: 20 _____

Volunteer Name: _____

Volunteer Signature _____

Station Signature* _____

**(Required from station where mileage expense incurred, if applicable.)*

BHSU RSVP MONTHLY TIMESHEET

Station/Agency	Job Classification (Check One)	Total hours in that Job for Month	Mileage (Only if Requesting Reimbursement)
	<input type="checkbox"/> Tutoring <input type="checkbox"/> Senior Meals <input type="checkbox"/> Senior Assistance (please specify—see below*) _____ <input type="checkbox"/> Mentoring <input type="checkbox"/> Food Distributon/MOW <input type="checkbox"/> Thrift/Rummage <input type="checkbox"/> Other Fundraising <input type="checkbox"/> Other Community Service _____		
	<input type="checkbox"/> Tutoring <input type="checkbox"/> Senior Meals <input type="checkbox"/> Senior Assistance (please specify—see below*) _____ <input type="checkbox"/> Mentoring <input type="checkbox"/> Food Distributon/MOW <input type="checkbox"/> Thrift/Rummage <input type="checkbox"/> Other Fundraising <input type="checkbox"/> Other Community Service _____		
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* **Senior Assistance includes:** **A.** Transportation, **B.** Visits **C.** Home Maintenance/Cleaning, **D.** In-home Services (cooking, bill pay, telephone reassurance) **E.** Picking up/delivering devices **F.** Volunteer Nurse **G.** Grocery Shopping **H.** Adult day-care, **I.** Assistance for Caregivers.

Monthly Tracking Calendar

For Volunteer Use Only (optional)

MONTH _____ YEAR _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please submit timesheets to : BHSU RSVP
1200 University Street, Unit 9089
Spearfish, SD 57799-9089
605-642-5198 / 1-877-293-0039 (toll free)

Or submit time via e-mail to: RSVP@BHSU.edu