



VOLUNTEER HOURS TRACKING FORM

Date: \_\_\_\_\_ Volunteers Name: \_\_\_\_\_

Session/Event/Program Date: \_\_\_\_\_ Session/Event/Program: \_\_\_\_\_

Division:

- Emergency & Fire Services
- Event Services
- Parks Operation & Maintenance
- Public Works
- Recreation & Culture
- Other (Specify): \_\_\_\_\_

Position: \_\_\_\_\_ Location: \_\_\_\_\_

Hour Tracking Chart

Date	Time	Hours	Supervisor Signature
e.g. – Jan 6, 2012	3:00 – 6:00 pm	3.0	<i>Kathy Sampson</i>
<b>TOTAL HOURS:</b>			

Office Use Only

Total Hours this Period: \_\_\_\_\_ Total Hours to Date: \_\_\_\_\_  
 Entered in Database By: \_\_\_\_\_ Date Entered: \_\_\_\_\_

Please attach and submit this form, along with your completed Community Services evaluation form and your school form to:

Volunteer Development OR Fax  
 c/o- Richvale Community Centre 905 737 0430  
 160 Avenue Road  
 Richmond Hill ON L4C 5L8

Questions or Comments, Please email: [volunteers@richmondhill.ca](mailto:volunteers@richmondhill.ca)