



## VOLUNTEER TIMESHEET

**Please check the service location where you volunteer:**

Grand Junction     
  Delta     
  Montrose     
  Ouray

**Please check the program where you volunteer and the service type that describes what you do:**

<p><b><u>PROGRAMS</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> B4 Babies &amp; Beyond</li> <li><input type="checkbox"/> Cooking Matters</li> <li><input type="checkbox"/> Corporate Office</li> <li><input type="checkbox"/> Day Haven</li> <li><input type="checkbox"/> Family Connections</li> <li><input type="checkbox"/> Family First</li> <li><input type="checkbox"/> Get Real</li> <li><input type="checkbox"/> Health Access/Access +</li> <li><input type="checkbox"/> DV Services GJ</li> <li><input type="checkbox"/> Life Adjustment Program</li> </ul>	<p><b><u>PROGRAMS</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Nurturing Parents</li> <li><input type="checkbox"/> Partnership for Children &amp; Families</li> <li><input type="checkbox"/> Residential Youth Services</li> <li><input type="checkbox"/> Property Services</li> <li><input type="checkbox"/> Senior Day Break</li> <li><input type="checkbox"/> The Commons</li> <li><input type="checkbox"/> The Fountains</li> <li><input type="checkbox"/> The Resource Center</li> <li><input type="checkbox"/> Volunteer Services</li> <li><input type="checkbox"/> Work Force Center</li> <li><input type="checkbox"/> Wellness Program</li> <li><input type="checkbox"/> ADRC</li> <li><input type="checkbox"/> Supporting Our Seniors</li> <li><input type="checkbox"/> DV Services Delta/Montrose</li> <li><input type="checkbox"/> Child &amp; Family Services</li> <li><input type="checkbox"/> Marketing &amp; Development</li> <li><input type="checkbox"/> Human Resources</li> <li><input type="checkbox"/> SB94</li> <li><input type="checkbox"/> The Family Resource Center-Montrose</li> </ul>	<p><b><u>SERVICE TYPES</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Administrative Support</li> <li><input type="checkbox"/> Special Events _____</li> <li><input type="checkbox"/> Special Projects</li> <li><input type="checkbox"/> Outreach Support</li> <li><input type="checkbox"/> Client Companion</li> <li><input type="checkbox"/> Internship/Practicum</li> <li><input type="checkbox"/> Cooking Instructor/Support</li> <li><input type="checkbox"/> Group Facilitation</li> <li><input type="checkbox"/> Activities Facilitation</li> <li><input type="checkbox"/> Crisis Line</li> <li><input type="checkbox"/> Professional Services</li> <li><input type="checkbox"/> Training Instructor</li> <li><input type="checkbox"/> Computer Services Support</li> <li><input type="checkbox"/> Tutoring</li> <li><input type="checkbox"/> Mentoring</li> <li><input type="checkbox"/> Janitorial</li> <li><input type="checkbox"/> Maintenance</li> <li><input type="checkbox"/> Landscaping</li> <li><input type="checkbox"/> Transportation</li> <li><input type="checkbox"/> Childcare</li> <li><input type="checkbox"/> Other _____</li> </ul>
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VOLUNTEER'S NAME \_\_\_\_\_

MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

Date	Description of Assignment/Activity	Time In*	Time Out *	Total Time	Mileage**
		Round to nearest ¼ Hour	Round to nearest ¼ Hour		

**(Turn over for more entry space)**

TOTAL MONTHLY HOURS: \_\_\_\_\_ VOLUNTEERS INITIALS \_\_\_\_\_

\* Do not include travel time in Hours Served Column unless vehicle is used on behalf of your program assignment-do not include time driving to and from volunteer assignment.

\*\* Do not include mileage in MILEAGE Column unless vehicle is used on behalf of your program assignment.

