Appendix 5 Volunteer Tracking Form

VOLUNTEERS
Work Site Sign-in/Sign-out Record -

Event Name/#_____ **City/County** _____ **Site**_____

Date_____ **Site Supervisor**_____ **Phone**_____

Please read before signing in: I have received safety instructions for working at this site and agree to follow the safety procedures and the directions of the site supervisor.

Volunteer's Name							
Last	**First**	**Time In**	**Time Out**	**Time In**	**Time Out**	**Total Hours**	**Brief Description of Work (clear debris, tarp roofs, etc.)**