

**Resilience: Advocates for Ending Violence
Volunteer/Intern Time Sheet
Side Two**

Please PRINT all information, except signature on side one. On side two of the timesheet, choose the code of the activity you spent time on and use that code on side one in the SOURCE column. Use a separate row for each type of activity. Make sure the date range on side two is the same as the two-week period of dates entered on side one. Total the hours for each day in the DAILY TOTAL row. SIGN YOUR TIME SHEET and submit by mail, e-mail or in person as soon as the two-week time period is completed.

Name: _____

Date Range: _____

Direct Service Hours

- AHCH After Hours Crisis Helpline/
Advocacy/Case Management
- BHCH Business Hours Crisis Helpline/
Advocacy/Case Management
- CC Child Care
- DCT Direct Client Transportation
- INDT Individual Therapy
- REC Reception
- SANE SANE On-call/Advocacy/
Case Management
- AID Shelter Aid/Assistant
- SPDS Special Projects (ADF, May Baskets)
- SGF Support Group Facilitation
- W4W Wardrobe for Work

Indirect Service Hours

- CLEAN Cleaning
- COMM Community Outreach
- DATA Data Entry
- DEV Development
- DON Donations
- GYW Gardening/Yard Work
- MAINT Maintenance
- PREV Prevention
- RM Records Management
- SPIS Special Projects (Reach)
- TRAIN Training or In-Service
- VOLP Volunteer Program

For office use only

Organization/Community Volunteer Time Sheet

Name of Organization

Contact Person

Phone

Mailing Address

City

State

Zip

E-mail address of Contact Person

Volunteer Activity

Activity Hours _____ X Participants _____ = Total Hours _____

VOLUNTEER FUNDING TIME

Contractors are required to maintain daily time and attendance records specifying time devoted to the VOCA project for all positions. This includes fully funded, partially funded and/or Match positions.

VOLUNTEER FUNDING DISTRIBUTION TIME REPORT

VOLUNTEER NAME

PAY PERIOD ENDING DATE

CVA PROJECT # 20004-24V18 31515-3V18; 31625-1V18 AGENCY FISCAL YEAR 10/01/2020 - 09/30/2021
--

DAILY HOURS BY FUNDING SOURCE

S O U R C E	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT
VOCA														
DAILY TOTAL														

THE ENTRIES ON THIS REPORT ARE, TO THE BEST OF MY KNOWLEDGE, COMPLETE AND TRUE

VOLUNTEER SIGNATURE	TITLE	DATE
<i>Sherry Martens</i>	<i>Volunteer Services Case</i>	
SUPERVISOR SIGNATURE	TITLE	DATE