FREDONIA
STATE UNIVERSITY OF NEW YORK

Volunteer and Community Services
Student Sign-In Sheet for Individuals

NAME OF VOLUNTEER (S)	DATE	TIME IN	TIME OUT	HOURS	AGENCY	TYPE OF SERVICE ACTIVITY	AGENCY SUPERVISOR SIGNATURE
(Example) Jane Doe	1/2/19	4:00	7:00	3	CCRM (The Friendly Soup Kitchen)	Serving Dinner	S. L. Smith

Please submit this form at the end of each service activity. Forms can be dropped off in the Williams Center, S 227, at the Office of Volunteer and Community Service. Contact: joyce.smith@fredonia.edu or phone (716) 673-3690 or go to: https://www.fredonia.edu/student-life/volunteer

Month of: _____ Total Number of Hours: _____