

Master Food Volunteer Hours Report

Name: _____ Date Submitted: _____

Address: _____

Email: _____ Phone: _____

Projects Report (Table I)

Date	Project/ Place Description	Location (City/County)	Project Hours ¹	Admin. Hours ²	Total Hours	Travel Mileage ³
TOTAL HOURS						

¹Include time spent traveling, preparing, and working for Extension programs in the “project hours” box.

²Include time spent working on administrative tasks in the “admin hours” box (help with copying, answer phones, scanning, mailing, brochures, advertising, etc.).

³Travel Mileage should be round trip mileage.

(Rev0110)

OFFICE USE ONLY

Approved by:	Date:	Entered by:
Previous hrs. total	+ Total hrs. this form	= Career Total

RETURN COMPLETED FORM TO YOUR LOCAL EXTENSION OFFICE BY THE FIFTH OF EVERY MONTH FOR THE PRECEDING MONTH IN WHICH YOU VOLUNTEER.

www.ext.vt.edu

Produced by Virginia Cooperative Extension, Virginia Tech, 2022

Virginia Cooperative Extension is a partnership of Virginia Tech, Virginia State University, the U.S. Department of Agriculture, and local governments. Its programs and employment are open to all, regardless of age, color, disability, gender, gender identity, national origin, political affiliation, race, religion, sexual orientation, genetic information, military status, or any other basis protected by law.
VT/0422/pdf/FST-409NP