

Report of Group Volunteer Service Hours

Complete form and return to the Office of Student Civic Engagement (Nicholson 267)
immediately following service project/event.

Name of Person Completing Form: _____

RMU E-mail: _____

Cell Phone #: _____

Name of the Volunteer Project/Event: _____

Nonprofit Organization That Project/Event Benefits: _____

Date(s) and Time(s) of Project/Event: _____

Student Organization Sponsoring Project/Event: _____

Advisor of Student Organization: _____

Brief Description of the Project/Event and Work Performed:

Participating Students' Names, ID #s, Number of Hours Served

Attach additional sheet of names if necessary.

Name	ID #	# Hours Served
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		