



## PARTICIPANT LISTING AND WORK REPORT, CONTINUED

Date/Time	Volunteer's Printed Name (Group Use Only)	Volunteer's Signature (Group Use Only)	Task	Total Hours

Notes:

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Volunteer Signature                      Print Name                      Date

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Designated Service Supervisor Signature    Print Name                      Date

\_\_\_\_\_  
Authorized DNCR Personnel Signature    Print Name                      Date

Discrimination on the basis of age, sex, race, color, marital status, physical or mental disability, religious creed, national origin, sexual orientation or any other non-merit factor is strictly prohibited.