MILLENNIUM VOLUNTEERS

PAVS

Record of Volunteering

Volunteer's name: _____

Host Organisation_____

Host Contact: _____ **Phone:** _____

Volunteer's activities	Date	Hours completed	Running Total

Volunteer's signature: _____ **Date**:_____

Host Organiser's signature: _____ **Date:**_____

N.B.: If you have more than one volunteering placement please use a separate sheet for each organisation. Thank you.