

University of Idaho Extension Idaho Master Gardener™ Program

VOLUNTEER ACTIVITY RECORD

Name (please print) _____ Date _____

For program year _____ Ending _____

Please complete this volunteer activity record each year of volunteer service and turn it in to your University of Idaho Extension office as directed by your program coordinator or extension educator. Please record specific accomplishments that you are most proud of on the back of this sheet. Let us know what you have done for your community!

If you need help filling out this form, please ask.

WHAT YOU DID AND WHEN			NUMBER OF CONTACTS MADE									
DATE	SUMMARY OF ACTIVITY	HOURS EARNED	MALE	FEMALE	ADULT	YOUTH	W	N	H	A	B	HC

Codes: W= Caucasian N = Native American H = Hispanic B = Black HC= Handicapped A = Asian