

CVU VOLUNTEER SERVICE SUMMARY

Form:0003-1-05

CVU VOLUNTEER SERVICE SUMMARY

Name _____

Address _____

County _____ Phone _____

E-mail address _____

Dates of Service: From _____ to _____

Report ALL certified volunteer hours accumulated during the year.
(HCE hours plus Community Service Hours all count as CVU hours.)

HOME AND COMMUNITY EDUCATION (HCE) HOURS—
Volunteer hours related directly to HCE. Example – Officer duties, club duties, programs presented, and preparation/travel time for all.

HCE VOLUNTEER HOURS

Teaching & Training Hours _____

Public Relations Hours _____

Admin. & Organization Hours _____

Total HCE Hours _____

Number of people reached _____

COMMUNITY SERVICE HOURS
(All hours other than those listed above)

Community Service Hours _____

Number of People reached _____

TOTAL CVU HOURS _____

Signature of certifying person
Advisor, Club or Council President _____

Position Held _____ Date _____

TO BE POSTMARKED NO LATER THAN DECEMBER 1 –

Mail to: Jackie Osterman, District IV CVU Chairman,
18513 Otterwood Avenue, Tampa, FL 33647-1834

Name _____

Address _____

County _____ Phone _____

E-mail address _____

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