

Volunteer Hours Form- Individual Name: _____

Activity Date:	Activity Name: For class? Y or N <i>*If "Yes," these hours will NOT count toward your 100 hours.</i>
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Start time:	End time:	Total hours:
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Please answer these questions: 1) What did you do? Please give many details. 2) What did you learn?

*****Students: Do NOT write here ☺ *****					
Category: Class CS JACE Campus Self	Emphasis: CS Other Committee	Semester: SP SU FA	Department: Academic Student	Advisor:	DB

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