



VOLUNTEER ACTIVITIES AND HOURS – HMU

Volunteer's Name: _____ **Month** _____

Phone Number: _____ **I did not volunteer this month** _____

E-Mail Address: _____

Date	Title of Presentation	Facility	# of Attendees	HOURS		
				Prep time	Travel time	Class time

E-mail completed form to pweisman@jssa.org or call: (301) 610-8337

Or mail to: **Paula Weisman**
JCO Program Assistant
200 Wood Hill Road
Rockville, MD 20850