



Volunteer Time Record

Volunteer job title	Volunteer name
Volunteer work site	Volunteer address city/state/zip
Volunteer supervisor name Region/division/unit/program code telephone cellular e-mail address	Volunteer telephone numbers work home cellular e-mail address

Volunteer Time Records are required by law for industrial insurance purposes. Volunteers should submit their time records monthly to their DNR Supervisor to sign and forward for payment of the industrial insurance premium. Please fill in the number of hours worked each day this month including transportation time to the work site:

month	year
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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	TOTAL

Volunteer Signature _____ **Month/Day/Year** _____

Supervisor Signature _____ **Month/Day/Year** _____ VT