Volunteer Hours Form 2016

(October 1 – September 30)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Class Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the total number of hours for each of the following categories for 2016 –

you may include estimated hours through the end of the year.

**Continuing Education:** Actual to date Plus estimated

(Required minimum 10 Hours)

**Community Outreach**: Actual to date Plus estimated

(Required Minimum 10 Hours)

**Volunteer Hours:** Actual to date: Plus estimated

(Required minimum total 40 hours, including Education)

**Administration Hours:** Actual to date: Plus Estimated

***Please answer the following:***

**How satisfied were you with your overall SCMG experience this year?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **⭘** | **⭘** | **⭘** | **⭘** | **⭘** |
| **Very Dissatisfied** | **Dissatisfied** | **Neutral** | **Satisfied** | **Very Satisfied** |

**Did you find projects that fit your interests and goals.**

|  |  |
| --- | --- |
| **⭘** | **⭘** |
| **Yes** | **No** |

**How satisfied were you with the projects / events that you volunteered for?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **⭘** | **⭘** | **⭘** | **⭘** | **⭘** |
| **Very Dissatisfied** | **Dissatisfied** | **Neutral** | **Satisfied** | **Very Satisfied** |

**How satisfied were you with the SCMG educational opportunites?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **⭘** | **⭘** | **⭘** | **⭘** | **⭘** |
| **Very Dissatisfied** | **Dissatisfied** | **Neutral** | **Satisfied** | **Very Satisfied** |

**What area of SCMG would you continue to volunteer for?**

**What would you suggest to retain current SCMG members?**

**What one thing would you change about SCMG?**