Lake Sumter
COMMUNITY COLLEGE
9501 U.S. Highway 441, Leesburg, FL 34788

Volunteer Participation Record Form

PERSONAL INFORMATION

NAME: _____ SOCIAL SECURITY NO: _____
Last First MI

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ DATE OF BIRTH: _____ PRESENT AGE: _____

CHECK ONE: ☐ Married ☐ Single ☐ Widowed ☐ Separated

EMERGENCY CONTACT:

_____
Name Relationship Phone Number

DAYS AVAILABLE: _____ HOURS: _____ LOCATION: _____

EDUCATION:

Elementary High School College/Major

PLEASE LIST SKILLS OR AREAS OF INTEREST:

LANGUAGES SPOKEN:

_____
VOLUNTEER SIGNATURE ***DATE***

_____
PARENT/GUARDIAN PERMISSION FOR STUDENTS UNDER 18 ***DATE***

Volunteer Log

Volunteer's Name _____

Department _____

Date Month / Day / Year	Location Of Service	Hours Worked

_____ _____ _____ _____

Volunteer's Signature Date Department Head or Designee Signature Date

PER 041