



Howard County Legacy Leadership Institute for the Environment

Volunteer Time Record (ELL Class of _____)

Name _____

Organization/Contact Person _____

Mentor coordinator* _____

Please estimate the hours earned with your organization since the start of your ELL Class, and record hours from then on. Send the retrospective information as soon as possible to hocollie@gmail.com. Then submit the form monthly with your additional, recent hours.

Date mm/dd/yy or range	Volunteer Activity Be as specific as possible; list multiple activities (on separate lines), if appropriate.	Hours this day (include commute time)	Total hours to date (include commute time)

* Mentor coordinator: the HoLLIE Coordinator most knowledgeable about your volunteer activities