

Volunteer Activities Form

Group number	Submitted by	Date Submitted	Form #	of
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Volunteer name _____

Report for month of _____ Page _____ of _____

Volunteer activities

Child's Name	Date of Activity	Type of activity (see codes below)	Type of contact (see codes below)	Out of Court?	Time spent (to 1/4 hour)	Miles driven
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Activity codes (26)

1 Attended foster care review	6 Child contacted out of court	11 Wrote reports
2 Attended hearing	7 Collaterals contacted	12 Other
3 Attended social service review	8 Foster parents contacted	
4 Biological parents contacted	9 Relatives contacted	
5 CASA supervisor contacted	10 Traveled	

Contact codes (28)

1 Face-to-face	2 E-mail	3 Phone	4 Written	5 Other	
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Notes _____

Entered into COMET by _____	Date _____	Checked by _____
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