

# NDSU Extension Volunteer Hours Reporting Form

Name \_\_\_\_\_ Home County \_\_\_\_\_ Hours for (choose one):

Please note any change in phone, email, or mailing address: \_\_\_\_\_

Check here if you prefer to NOT receive a recertification form via USPS mail.

Report hours through October 31 . Send in by November 15 of each year to remain in active status with Master Gardener Program.

Date	Location: must be ND or border county in MN, SD, MT	INTERNS ONLY Category: Admin, Community, Education	Description of Volunteerism, Diagnostic Work, Teaching, etc If needed, and to help us better understand projects and nominate volunteers for awards, please attach additional items to support your work this growing season. <b>We want to reward your hard work!</b>	Total Hours: Prep, drive, execute, clean-up, research...

By submitting this document I verify that I completed the volunteer work above.

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| <ul style="list-style-type: none"> <li>Scan and email to: Shannon.Ueker@ndsu.edu</li> <li>Fax to: ATTN: Shannon Ueker, 701.231.8474</li> </ul> | OR | <ul style="list-style-type: none"> <li>USPS mail to: NDSU Extension Master Gardener<br/>Dept 7670, PO Box 6050<br/>Fargo, ND 58108</li> </ul> |
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