

Basic Volunteer Time Off (VTO) Tracking Template

Organization Name: _____

Volunteer Role (position or activity): _____

Volunteer Name: _____

Volunteer Email Address (work email): _____

Volunteer Phone Number: _____

VTO Pre-Approval Request Form

Date of Request (MM/DD/YYYY): _____

Date(s) of VTO Activity (MM/DD/YYYY): _____

Total VTO Hours Requested: _____

Description of activity/Reason for VTO: _____

Volunteer Time-Tracking Log

Name	Activity	Date	Check-In	Check-Out	Total # Hours

Volunteer Supervisor Signature: _____

Date: _____