

# Grant Volunteer Activity Report

**INSTRUCTIONS:** Enter hours worked in hourly increments. Enter total time worked for each day in the appropriate column. For all hours worked, enter each grant # and the description of work activity. By signing the Grant Volunteer Activity Report, you are certifying the report to be correct.

Agency Name: CASA of Ellis County, Inc. Volunteer Name: \_\_\_\_\_ Month / Year: \_\_\_\_\_

VOCA Grant Number: 17008-04

## VOCA Volunteer Activities

Description of Work Activity	Day of the Month																															Total
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
<b>Services To Children</b>																																
Education Advocacy (School related)																																
Medical Advocacy (Psychological or medical related)																																
Visits to Child/Foster Family/Relatives																																
Permanent Placement Research such as courtesy home studies on relative or kinship																																
Visit with CPS or attorney assigned to the child/parents to advocate for permanency.																																
Supervision with CASA staff																																
Documentation (related to Direct Services)																																
Conference/Training (related to Direct Services)																																
Mediation																																
Personal Contacts with Child on Phone																																
Courtesy Home Visits to relatives																																
<b>Total VOCA Volunteer Hours</b>																																

## Other Volunteer Activity (non-VOCA related services)

Description of Work Activity	Day of the Month																															Total
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Court Room Advocacy																																
Court Reports/Documentation																																
Fundraising																																
Other Training *																																
<b>Total Other Volunteer Hours</b>																																

\* Other Training involves training in activities that are not allowable under VOCA, such as training on how to write court reports or how to raise funds.

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_

Mileage: \_\_\_\_\_  
Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_