

Heart Gallery Mentor Program

Monthly Volunteer Activity Report

Please update us on any address or phone number changes for you and your child.

1. Name
2. Youth
3. Are your Phone Number, Address, and Email the same? Yes No (list new)

4. This Report represents a total of:
 - a. # of Visits
 - b. # of Hours
 - c. # of Letters or email sent/ phone calls made or received
5. Do you need any help from us? Yes No
6. If yes, please explain.

7. Please Explain things you have learned about your youth while spending time this with them month.

8. Please briefly list the type of activities you have enjoyed with your youth this month.

9. Is there any other information about your friendship that you would like to share?