

Arrowhead United Way

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 San Bernardino, CA 92401
 (909) 884-9441
 Fax: (909) 885-4096
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Timesheet

Name: _____ Telephone: _____

Address: _____
 Street City Zip

School: _____ Graduation Year: _____

Email: _____

* Please round hours to nearest 1/2 hour – for example, 1 hour and 23 minutes = 1.5 hours; 1 hour and 10 minutes = 1 hour.

Date	Time In	Time Out	Total Hours	Agency Name/Program you volunteered for	Supervisor's Signature

Total hours on timesheet: _____

If you are a high school student and would like to be recognized in the *Teens Make a Difference Ceremony*, please submit all completed timesheets to Arrowhead United Way