Volunteer Activity Report

Faith Community Nurse: Dates:	se:			Faith Community: Email to: Cari Moodie at cari.	ri.moodie@saintalphonsus.org
Directions: Please record	the service provided	d as below.	JW.		
Serv	-	# of People	Personal Service Time		Comments
B. One-to-One C. Professional D. Office Work	One Client Care Ional Development Cat A Nork	(In ategories A or B)	(Total Service Time includes prep/clean-up, paperwork, and travel)		
	Totals:				
				Categories	
A. Church	ch Class/Program		В.	One-to-One Client Care	C. Professional Development
Examples Programs and Events Support groups			Examples Health Screening (B	pricon o	Church, FCN, Other)
n (bulletin,	newsletter, brochure)		Counseling (health, grief, spiritual) Referrals Accompany to appointments Telephone consultation Other	grief, spiritual) ntments on	Other

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