

I-You/Ageless Art Reporting Hours

Last Name.1st Initial (e.g.: smith.j) _____

Visitation Type: Individual

Date: _____ Enter Time (.25 Increments): _____

Activities Type: I-You Group Ageless Art Project Holiday Helpers

Date: _____ Enter Time (.25 Increments): _____ # of Residents _____

Please download form into your computer, fill in the blanks, and email to:

- Nancy Cleveland: cleveland.n@fsa-cc.org or
- Angie Medina: medina.a@fsa-cc.org

For one-on-one visits,

Under Visitation Type, Check Individual, then enter the date and number of hours

For group visits:

Under Activities Type, Check I-You Group, then enter date, the number of hours volunteered and the number of residents.

Note: You must have Adobe Reader installed on your computer

If you don't have Adobe Reader installed, please email hours separately

Thank You for your time!