

SUNY SCHEENECTADY
COUNTY COMMUNITY COLLEGE
SCHOOL OF HOTEL, CULINARY ARTS AND TOURISM

School of Hotel, Culinary Arts, & Tourism
600 Hour Volunteer Certification Form

Student Name: _____

Date of Event: _____

Event Title: _____

Number of Hours Volunteered: _____

Supervising faculty member: _____

Description of duties/briefly describe what you did at this event:

Faculty

Signature: _____