

Approved by OIRA 3045-0122 exp 12/31/2021

Name of Organization

AmeriCorps Program

Type of Event

Date/Time of Event

Date/Time of Event: Date

Date/Time of Event: Time

Event Address

Event City

Event State

Description of Event

Volunteers Needed

Point of Contact Full Name

Point of Contact Email

Point of Contact Phone Number

Elected Official, Community Leader, or VIP Attendees?

Additional Information

Event accomplishments, links to media coverage, list of volunteer activities, or other related information