NYS Office of Victim Services

Victims Services Grant Application

2022 VOLUNTEER FORM

|  |  |  |  |
| --- | --- | --- | --- |
| Volunteer Title Volunteer Activities Time Used as Match   |  |  |  | | --- | --- | --- | |  |  |  | |

By completing this form, you are attesting there is or will be a minimum of (1) active volunteer in your organization by the time of contract execution or that your organization is actively seeking a volunteer.