



VOLUNTEER.GOV ONBOARDING INSTRUCTIONS

Reader notice: Some pictures may require zoom

Last updated: September 11, 2025

Step 1: Click the “Apply Now” button for the opportunity for which you are interested in volunteering.

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Honouliuli Volunteer

National Park Service - Honouliuli National Historic Site

POSITION DETAIL QUICK LOOK:

-  Address
National Park Service
Honolulu, Hawaii 96818
-  Type
On-Site Position
-  Dates
8/22/2025 - 8/22/2025
-  Point of Contact
Hannah Jian Shiraishi-Rzeszewicz
hannah_shiraishi-rzeszewicz@nps.gov

Description

This is where general information about the volunteer position or event will be.

Apply Now

 Category
Cultural and Historic Resources
Science and Natural Resources

 Dates
8/22/2025 - 8/22/2025



Step 2: Fill out all blank areas marked with the “★” on the volunteer application.

Volunteer Application

This volunteer application will automatically fill out with information from your Volunteer.gov profile and will give you the option to update your profile information if needed.

It includes the following pieces of information: basic contact, optional demographic, and emergency contact. If needed, you may also be asked to include information about your knowledge, skills, abilities, education, references, and availability.

If you have any questions about this application or the volunteer opportunity, please review our [Help Center](#) or [contact the Volunteer Coordinator](#) listed on the opportunity.

Step 1 of 1: Personal Information

Basic Details

★ First Name

★ Last Name

Use accurate last name; it is used to verify unique profile. Please ensure accuracy.

★ Date of Birth

Use accurate date of birth; it is used to verify unique profile. Please ensure accuracy.

★ Email Address

Use accurate email address; it is used to verify unique profile. Please ensure accuracy.

★ Phone

Race (Select one or more, regardless of ethnicity):

☐ American Indian or Alaskan Native

☐ Asian

☐ Black or African American

☐ Native Hawaiian or other Pacific Islander

☐ White

Are you a Military Veteran or Active Duty Military?

Do you have a disability?

Emergency Contact

★ Emergency Contact First Name

★ Emergency Contact Last Name

★ Emergency Contact Phone

Use telephone format 000-000-0000 or you may also enter an international number.

★ Emergency Contact Email Address

★ Emergency Contact Street Address, Apt.# ⓘ

★ Emergency Contact Country

★ Emergency Contact City

Use telephone format 000-000-0000 or you may also enter an international number.

Address

★ Street Address, Apt.# ⓘ

★ City

★ Country

★ State

★ Zip Code

★ Country of Citizenship ⓘ

United States

Canada

Afghanistan

Åland Islands

Albania

★ U.S. Citizen or Permanent Resident

Demographic Information

Sex

Ethnicity (Select one):

Use telephone format 000-000-0000 or you may also enter an international number.

★ Emergency Contact Email Address

★ Emergency Contact Street Address, Apt.# ⓘ

★ Emergency Contact Country

★ Emergency Contact City

★ Emergency Contact State

★ Emergency Contact Zip Code



Step 3: After submitting the volunteer application, you should be met with a message confirming your application was submitted. Click the “View Application” button on the bottom left corner.

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Volunteer Application

Congratulations on successfully submitting your application to this volunteer opportunity!

You have two weeks from the submission date to withdraw your application, if necessary.

Many volunteer opportunities receive far more applications than available volunteer roles. It is a good idea to apply to several volunteer opportunities in order to find a good fit. Remember: new volunteer opportunities are being added all the time!

If you have any questions about this application or the volunteer opportunity, please review our [Help Center](#) or contact the [Volunteer Coordinator](#) listed on the opportunity.

[View Application](#)

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Step 4: After clicking the “View Application” button from step 3, this page should appear. Your status will be set to "Application Under Review". A staff member will look over your application and may reach out for an interview during this time.

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My Application

[← BACK TO MY PROFILE](#)

Application AP-00128373
Status: Application Under Review

Withdraw Application

 Volunteer Tasks (0)

The Time Log is used to track hours spent volunteering for this opportunity. Use the Add Hours button to submit hours volunteered to the Volunteer Coordinator for approval. Only log entries approved by the Volunteer Coordinator will count toward your total hours volunteered.

 Time Log (0)

Included below is a copy of your application.

Please note: Not all volunteer opportunities require the same application information, as a result some fields within this application may be blank.

Basic Information

Volunteer Name

Date of Birth



Step 5: Click on the “My Profile” tab. "If a staff member approves your application, an onboarding task will be allocated, changing the status to "Onboarding Task Assigned". Click on the link labeled “AP-” under the section titled “Application Number”. Note that the name of the application number may vary.

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My Personal Information

Save time when signing up for volunteer opportunities. Tell us your information and preferences and they'll automatically be filled in for you the next time you apply.

Update My Information

My Opportunities

Keep track of volunteer opportunities you've applied to here. Haven't applied to anything yet? Browse the latest opportunities in [Discover Opportunities](#) and find something that sparks your passion.

Contact the Volunteer Coordinator to learn more about your application status.

OPEN OPPORTUNITIES

Application Number	Volunteer Opportunity Link	Volunteer Opportunity Site	Application Status	Total Hours	Outstanding Hours & Tasks
1 AP-	Honouliuli Volunteer	Honouliuli National Historic Site	Onboarding Task Assigned	0	

Showing 10 of 1

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CLOSED/CANCELED OPPORTUNITIES



Step 6: A volunteer task will appear on the “My Application” page. Click the link titled "Individual Volunteer (301a)" underneath the Volunteer Task Name section. This might say something different if you are an individual onboarding for an entire group of volunteers.

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My Application

[← BACK TO MY PROFILE](#)

Application AP-00128373

Status: Onboarding Task Assigned [Withdraw Application](#)

 Volunteer Tasks (1)

1 item • Updated a few seconds ago

	Volunteer Task Name	Task Title	Completed	Task Directions
1	Individual Volunteer (301a)	Honouliuli	☐	Congratulations, you have been selected to volunteer! In order to complete your onboarding p... View All

The Time Log is used to track hours spent volunteering for this opportunity. Use the Add Hours button to submit hours volunteered to the Volunteer Coordinator for approval. Only log entries approved by the Volunteer Coordinator will count toward your total hours volunteered.

 Time Log (0)

Included below is a copy of your application.

Please note: Not all volunteer opportunities require the same application information, as a result some fields within this application may be blank.



Step 7: Click “Complete Form” to move forward with the necessary onboarding task assigned. Do not worry about downloading the files as that will be required in steps 9 & 10.

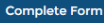


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My Profile > Application > Volunteer Task

Individual Volunteer (301a)



Volunteer Task Name

Individual Volunteer (301a)

Application

[AP-00128373](#)

Completed

☐

Task Directions

Congratulations, you have been selected to volunteer! In order to complete your onboarding process, please review and complete all required documents and tasks. The included Volunteer Service Description will outline your duties and requires validation that will serve as your legal signature. If you have questions, please reach out to the Volunteer Coordinator listed for this volunteer opportunity.

Photography Affirmation

☐

Volunteer Position/Group Project Title

Honouliuli Test Volunteer

Background Check Affirmation

☐

Public Domain Affirmation

☐

Health Affirmation

☐

Medical Affirmation

☐

Files

File Name - HONO_20250805_3HA_VegPos

Download

File Name - HONO_20250717_SD_VegetationPosition

Download

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Step 8: Review your information. If the information displayed looks accurate, click the "Next" button in the bottom right corner.

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Jasleen Tun

Review Individual Volunteer Form

Review	Description of Service	Risk Assessment	Affirmations	Final Review
VOLUNTEER SERVICE AGREEMENT-NATURAL & CULTURAL RESOURCES Volunteer Agreement Type: SOLA Individual Volunteer Name: Jasleen Tun Street Address, Apt #: 1084 Keopulu pl. Date of Birth: June 27, 2000 Phone: 808-341-8025 Email Address: tunjasleen@gmail.com U.S. Citizen or Permanent Resident: Yes, I am a U.S. citizen or Permanent Resident. City: Honolulu State: Hawaii Zip Code: 96825				
DEMOGRAPHIC INFORMATION (Optional). Please indicate both ethnicity and race and tell us if you are a veteran or have a disability. Multiracial respondents may select two or more races. This information will inform our understanding of diversity and inclusion among the volunteer force in the natural and cultural resource areas. Ethnicity (Select one): Not Hispanic, Latino, or Spanish Origin Do you have a disability? Decline to Answer Race (Select one or more, regardless of ethnicity): Asian Are you a Military Veteran or Active Duty Military? No Military Affiliation				
EMERGENCY CONTACT INFORMATION Name: Jasleen Tun Street Address, Apt #: 1084 Keopulu pl. Phone: 808-341-8025 City: Honolulu Zip Code: 96825 Email Address: joleentunhi@gmail.com State: Hawaii				
GOVERNMENT OFFICIAL COMPLETES THIS SECTION Name of Agency/Bureau: National Park Service Agency Contact Name: Hannah Jian Shiraishi-Rzeszewicz Agency Contact Phone: Reimbursements Approved: Yes Agreement Number: 05-25-7939-6850 Agency Contact Email: hannah._shiraishi-rzeszewicz@nps.gov Volunteer Position/Group Project Title: Honouliuli Test Volunteer Type and Rate of Reimbursement: See Description of Service for details. Description of service to be performed. Provide a brief abstract of volunteer or service activity and the location of the volunteer activity, and attach description of service to be performed. Service description should include details such as time and schedule commitment, use of government vehicle, use of personal equipment and/or vehicle, skills required (note certifications if necessary), level of physical activity required, etc. Volunteer/Service Activity Abstract: See attached Description of Service for additional details related to the Honouliuli Test Volunteer taking place at Honouliuli National Historic Site. Check all that apply: - Checked - Description of service attached - Unchecked - Valid Driver's License required - Unchecked - Medical Clearance Required - Unchecked - OF-301b Volunteer Sign-up Form for Groups attached - Unchecked - Background Investigation required - Checked - Risk Assessment attached - Unchecked - Other:				
PARENTAL CONSENT FOR VOLUNTEER UNDER AGE 18 Name: N/A Street Address, Apt #: N/A Zip Code: N/A State: N/A Phone: N/A City: N/A Email Address: N/A I affirm that I am the parent/guardian of the above named volunteer. I understand that the agency volunteer program does not provide compensation, except as otherwise provided by law, and that the service will not confer on the volunteer the status of a Federal employee. I have read the attached description of the service that the volunteer will perform. I give my permission for (N/A) to participate in the specified volunteer activity. Parent/Guardian Signature: N/A Date: N/A				

Parent/Guardian Signature: N/A Date: N/A	
VOLUNTEER & GROUP LEADER AFFIRMATION	
Unchecked - I understand that I will not receive any compensation for the above service and that volunteers are NOT considered Federal employees except as otherwise provided by law. I understand that volunteer service is not creditable for leave accrual or any other employee benefits. I also understand that either the government or I may cancel this agreement at any time by notifying the other party. I understand that my volunteer position may require a reference check, background investigation, and/or a criminal history inquiry in order for me to perform my duties.	
Unchecked - I understand that all publications, films, slides, videos, artistic or similar endeavors, resulting from my volunteer services as specifically stated in the attached job description, will become the property of the United States, and as such, will be in the public domain and not subject to copyright laws.	
Unchecked - I understand the health and physical condition requirements for doing the work as described in the job description and at the project location.	
Unchecked - I know of no medical condition or physical limitation that may adversely affect my (or members of the group's) ability to provide this service. (if a group, see attached OF-301b)	
Unchecked - I consent to being photographed and to the release of my photographic image. (if a group, see attached OF-301b)	
I do hereby volunteer my services as described above, to assist in authorized activities at National Park Service and I agree to follow all applicable safety guidelines. See attached OF301b attached if a member of a group.	
Signature of Volunteer or Group Leader: Date:	
The above-named agency agrees, while this arrangement is in effect, to provide such materials, equipment, and facilities that are available and needed to perform the service described above, and to consider you as a Federal employee only for the purposes of tort claims, liability and injury compensation to the extent not covered by your volunteer group, if any.	
Signature of Government Representative: Date:	
TERMINATION OF AGREEMENT	
Agreement Terminated Date:	Total Hours Completed:
Signature of Government Representative:	
PUBLIC BURDEN STATEMENT	
Completing this form is voluntary, but failure to provide the information will prevent program participation. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1093-0006. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of the Interior (USDOI), U.S. Department of Agriculture (USDA), U.S. Department of Defense (USDOD), and U.S. Department of Commerce (USDOC) are equal opportunity providers and employers and prohibit discrimination in all programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means of communication of program information should contact the volunteer program to which they are applying. If you would like to file a Section 508-related complaint, please contact the DOI Section 508 Program via email at section508@ios.doi.gov or phone (202) 208-1530.	
Signature of Government Representative:	
PUBLIC BURDEN STATEMENT	
Completing this form is voluntary, but failure to provide the information will prevent program participation. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1093-0006. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of the Interior (USDOI), U.S. Department of Agriculture (USDA), U.S. Department of Defense (USDOD), and U.S. Department of Commerce (USDOC) are equal opportunity providers and employers and prohibit discrimination in all programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means of communication of program information should contact the volunteer program to which they are applying. If you would like to file a Section 508-related complaint, please contact the DOI Section 508 Program via email at section508@ios.doi.gov or phone (202) 208-1530.	
PRIVACY ACT STATEMENT	
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Do you need to make updates to your volunteer agreement form? Information that is outdated or incorrect should be updated.	
* Please select: ☐ No	
Next	
FIND OPPORTUNITIES BY EACH PARTNER	
	
	
	
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Step 9: Download and review the Service Description (SD). Once done reviewing, click the "Next" button in the bottom right corner.

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Description of Service

✓

Description of Service

Risk Assessment

Affirmations

Final Review

Download the file before continuing on to the next screen.

File Name - HONO_20250717_SD_VegetationPosition

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Step 10: Download and review the Job Hazard Analysis (JHA). Once done reviewing, click the "Next" button in the bottom right corner.

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Search volunteer opportunities  

Risk Assessment

✓

✓

Risk Assessment

Affirmations

Final Review

Download the file before continuing on to the next screen.

File Name - HONO_20250805_JHA_VegPos

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Step 11: Check all affirmation boxes and then select the "Next" button in the lower right.

Affirmations

✓

✓

✓

Affirmations

Final Review

☒

I understand that I will not receive any compensation for the above service and that volunteers are NOT considered Federal employees except as otherwise provided by law. I understand that volunteer service is not creditable for leave accrual or any other employee benefits. I also understand that either the government or I may cancel this agreement at any time by notifying the other party. I understand that my volunteer position may require a reference check, background investigation, and/or a criminal history inquiry in order for me to perform my duties.

☒

I understand that all publications, films, slides, videos, artistic or similar endeavors, resulting from my volunteer services as specifically stated in the attached job description, will become the property of the United States, and as such, will be in the public domain and not subject to copyright laws.

☒

I understand the health and physical condition requirements for doing the work as described in the job description and at the project location.

☒

I know of no medical condition or physical limitation that may adversely affect my (or members of the group's) ability to provide this service. (If a group, see attached OF-301b)

☒

I consent to being photographed and to the release of my photographic image. (If a group, see attached OF-301b)

☒

By checking this box, I attest that my responses on this form and any attachments are true, complete, and accurate. I am the Volunteer or have the authority to sign on behalf of the Volunteer. This Volunteer Service Agreement is subject to the conditions outlined herein. The government parties included within the agreement accept this agreement according to its expressed or implied terms.

Previous

Next





Step 12: This is the final step before completion of the onboarding task. Please do a final review of the information you provided. If it all looks accurate, click the “Submit” button in the bottom right corner.

Final Review

✓

✓

✓

✓

Final Review

VOLUNTEER SERVICE AGREEMENT-NATURAL & CULTURAL RESOURCES

Volunteer Agreement Type:
VOLUNTEER SERVICE AGREEMENT-NATURAL & CULTURAL RESOURCES

U.S Citizen or Permanent Resident:
U.S Citizen or Permanent Resident

Volunteer Name:
City:

Street Address, Apt #:
State:

Date of Birth:
Zip Code:

Phone:

Email Address:

DEMOGRAPHIC INFORMATION (Optional). Please indicate both ethnicity and race and tell us if you are a veteran or have a disability. Multiracial respondents may select two or more races. This information will inform our understanding of diversity and inclusion among the volunteer force in the natural and cultural resource areas.

Ethnicity (Select one):
Race (Select one or more, regardless of ethnicity):

Do you have a disability?
Are you a Military Veteran or Active Duty Military?

EMERGENCY CONTACT INFORMATION

Name:
Phone:
Email Address:

Street Address, Apt #:
City:
State:

Zip Code:

GOVERNMENT OFFICIAL COMPLETES THIS SECTION

Name of Agency/Bureau:
National Park Service

Agreement Number:

Agency Contact Name:
Hannah Jian Shiraishi-Rzeszewicz

Agency Contact Email:
hannah_shiraishi-rzeszewicz@nps.gov

Agency Contact Phone:
Honouliuli Volunteer

Volunteer Position/Group Project Title:
Honouliuli Volunteer

Reimbursements Approved:
Yes

Type and Rate of Reimbursement:
See Description of Service for details.

Description of service to be performed. Provide a brief abstract of volunteer or service activity and the location of the volunteer activity, and attach description of service to be performed. Service description should include details such as time and schedule commitment, use of government vehicle, use of personal equipment and/or vehicle, skills required (note certifications if necessary), level of physical activity required, etc.

Volunteer/Service Activity Abstract:
See attached Description of Service for additional details related to the Honouliuli Test Volunteer taking place at Honouliuli National Historic Site.

Check all that apply:

Checked - Description of service attached

Unchecked - Valid Driver's License required

Unchecked - Medical Clearance Required

Unchecked - OF-301b Volunteer Sign-up Form for Groups attached

Unchecked - Background Investigation required

Checked - Risk Assessment attached

Unchecked - Other:

PARENTAL CONSENT FOR VOLUNTEER UNDER AGE 18

Name: N/A
Street Address, Apt #: N/A
Zip Code: N/A
State: N/A

Phone: N/A
City: N/A
Email Address: N/A

I affirm that I am the parent/guardian of the above named volunteer. I understand that the agency volunteer program does not provide compensation, except as otherwise provided by law, and that the service will not confer on the volunteer the status of a Federal employee. I have read the attached description of the service that the volunteer will perform. I give my permission for (N/A) to participate in the specified volunteer activity.

Parent/Guardian Signature: N/A
Date: N/A

VOLUNTEER & GROUP LEADER AFFIRMATION

Checked - I understand that I will not receive any compensation for the above service and that volunteers are NOT considered Federal employees except as otherwise provided by law. I understand that volunteer service is not creditable for leave accrual or any other employee benefits. I also understand that either the government or I may cancel this agreement at any time by notifying the other party. I understand that my volunteer position may require a reference check, background investigation, and/or a criminal history inquiry in order for me to perform my duties.

Checked - I understand that all publications, films, slides, videos, artistic or similar endeavors, resulting from my volunteer services as specifically stated in the attached job description, will become the property of the United States, and as such, will be in the public domain and not subject to copyright laws.

Checked - I understand the health and physical condition requirements for doing the work as described in the job description and at the project location.

Checked - I know of no medical condition or physical limitation that may adversely affect my (or members of the group's) ability to provide this service. (If a group, see attached OF-301b)

Checked - I consent to being photographed and to the release of my photographic image. (If a group, see attached OF-301b)

I do hereby volunteer my services as described above, to assist in authorized activities at National Park Service and I agree to follow all applicable safety guidelines. See attached OF301b attached if a member of a group.

Signature of Volunteer or Group Leader:
Digitally Signed By:

Date:

The abovenamed agency agrees, while this arrangement is in effect, to provide such materials, equipment, and facilities that are available and needed to perform the service described above, and to consider you as a Federal employee only for the purposes of tort claims, liability and injury compensation to the extent not covered by your volunteer group, if any.

Signature of Government Representative:
Digitally Signed By:

Date:

TERMINATION OF AGREEMENT

Agreement Terminated Date:
Total Hours Completed:

Signature of Government Representative:
Digitally Signed By:

PUBLIC BURDEN STATEMENT

Completing this form is voluntary, but failure to provide the information will prevent program participation. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1093-0006. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of the Interior (USDOI), U.S. Department of Agriculture (USDA), U.S. Department of Defense (USDOD), and U.S. Department of Commerce (USDOC) are equal opportunity providers and employers and prohibit discrimination in all programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means of communication of program information should contact the volunteer program to which they are applying. If you would like to file a Section 508-related complaint, please contact the DOI Section 508 Program via email at section508@ios.doi.gov or phone (202) 208-1530.

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Submit



Step 13: Congratulations! You have completed the Onboarding Task! At this point, select the “My Profile” button.





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Congratulations! You completed your onboarding process to volunteer with National Park Service at Honouliuli National Historic Site. The Volunteer Coordinator for the Honouliuli Volunteer Test volunteer opportunity will provide next steps.

[View Volunteer Task](#)

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Step 14: Once the onboarding task is completed, a staff member will review the information and sign it. Once the staff member signs it, the Volunteer Service Agreement (VSA) is complete and valid for up to one calendar year from the date of signature. The volunteer status will change to "Ready to Volunteer", and at that point the volunteer is ready to work. This is the final step of the onboarding task until the service is completed.

The screenshot shows the 'My Profile' page on Volunteer.gov. The 'My Opportunities' section displays a table of 'OPEN OPPORTUNITIES'. The first row shows an application for 'Honouliuli National Historic Site' with a status of 'Ready to Volunteer', which is circled in red and indicated by a large blue arrow. Below this, there is a section for 'CLOSED/CANCELED OPPORTUNITIES' showing two applications that are 'Closed'. At the bottom, there are links for 'usa.gov', 'Privacy', 'Accessibility', and 'Vulnerability Disclosure Policy', along with logos for various partner organizations including the National Park Service, USGS, and others.

Application Number	Volunteer Opportunity Link	Volunteer Opportunity Site	Application Status	Total Hours	Outstanding Hours & Tasks
1 AP-00128373	Honouliuli Volunteer Test	Honouliuli National Historic Site	Ready to Volunteer	0	

Application Number	Volunteer Opportunity Link	Volunteer Opportunity Site	Volunteer Opportunity Status	Total Hours	Outstanding Hours & Tasks
1 AP-00116423	HONO TEST	Honouliuli National Historic Site	Closed	0	
2 AP-00121874	Honouliuli Table Event	Honouliuli National Historic Site	Closed	0	

Total Lifetime Hours: 0.00
Total Hours for Volunteer Pass: 0.00
Total Fiscal Year Hours: 0.00

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Step 15: This is the first step, once the service has been completed. Your application status will automatically be set to "Service Complete". A staff member will review the hours logged and need to approve them for them to count. In order to log hours begin by clicking "Add Hours" in the bottom left corner.

My Application

[← BACK TO MY PROFILE](#)

Application AP-00116423

Status: Service Complete

[Withdraw Application](#) ⓘ

Volunteer Tasks (1)				
1 item • Updated a few seconds ago				
Volunteer Task Name	Task Title	Completed	Task Directions	
1	Individual Volunteer (301a)	Bio Team	☒	Congratulations, you have been selected to volunteer! In order to complete your onboarding process, pl... View All

The Time Log is used to track hours spent volunteering for this opportunity. Use the Add Hours button to submit hours volunteered to the Volunteer Coordinator for approval. Only log entries approved by the Volunteer Coordinator will count toward your total hours volunteered.



Time Log (0)

Included below is a copy of your application.



Step 16: Insert the date and completed hours of service into the respective boxes then click “Submit Time Log”.



AP-00116423 > New Volunteer Time Log

New Volunteer Time Log

Complete your time log entry for HONO TEST

> Additional information

+ Add Row

	Position	Category	* Date Hours Occurred	* Total Hours	
1	Bio Team	Science and Natural Resources			

Submit Time Log

FIND OPPORTUNITIES BY EACH PARTNER





Step 17: After clicking “Submit Time Log”, a confirmation message will be displayed that your volunteer hours have been recorded. This marks the completion of all the assigned volunteering tasks.



✓ Volunteer time log was successfully submitted. Review your records [here](#). ✕



New Volunteer Time Log

Complete your time log entry for HONO

> Additional information

+ Add Row

Submit Time Log

Thank you for volunteering with Honouliuli National Historic Site!