



UNIVERSITY OF NORTH CAROLINA
CHARLOTTE BOTANICAL GARDENS
Certificate of Native Plant Studies

Volunteer Service Log

(30 hour requirement)

Date	Hours	Project/Event	Agency	Contact Name	Signature
Total Number:					

CNPS Student Name: _____

CNPS Student Phone: _____

CNPS Student Email: _____

 Signature of student

 Date

**Please submit to amytipton@uncc.edu or drop off at the Greenhouse*

I attest that the hours listed above are a true and accurate representation of my time invested in Native-Plant-related endeavors.