

Department of the Treasury – Internal Revenue Service
Volunteer Assistance Summary Report

Please mail, fax or e-mail this form, or a document containing all information requested on this form to your IRS reporting office by the 3rd business day after the end of the month**. (Necessary only if new volunteers have reported to your site.)

Contact your local IRS office for mail or e-mail address

SPEC Use Only

TS Name: _____

TS SEID: _____

Date entered into STARS: _____

Date: _____

Site Identification Number: S _____ - _____ - _____

Site Name: _____

Site Address: _____

Partner's Name: _____ Contact Number: _____

Site Coordinator/Manager's Name: _____

Address: _____ City: _____ State: _____ ZIP: _____

Site Coordinator/Manager's Phone Number: (_____) _____

Reminders:

1. Total Number of Volunteers Reported on This Form _____
2. Total Number of Volunteers Previously Reported This Filing Season _____
3. Total Number of Volunteers Reported This Filing Season (Add 1 & 2) _____
4. For "Date Certified" an entry must be made for all volunteers who prepare tax returns and conduct quality reviews. This includes tax professionals and other volunteers who were previously exempt from taking a test.

VOLUNTEER LIST

**The name and volunteer role (position) should only be entered on this form the first time they report to your site.

Future completion of this form is only necessary if new volunteers have reported to your site.

Note: Site Coordinators, please include your name in the list of volunteers below.

| Volunteer Information | Volunteer Certified Training Levels (Check all that apply) | Does this volunteer also work at another VITA/TCE site? | | If Yes, Indicate Site Name(s) |
|--|---|---|----|-------------------------------|
| | | Yes | No | |
| Name _____ Volunteer Position _____ Address _____ _____ | Date Certified _____ <input type="checkbox"/> VITA/TCE Basic <input type="checkbox"/> VITA/TCE Intermediate <input type="checkbox"/> VITA/TCE Advanced <input type="checkbox"/> VITA Military <input type="checkbox"/> VITA Foreign Student <input type="checkbox"/> VITA Puerto Rico <input type="checkbox"/> NOT Certified (ex. Greeter) | | | |
| Name _____ Volunteer Position _____ Address _____ _____ | Date Certified _____ <input type="checkbox"/> VITA/TCE Basic <input type="checkbox"/> VITA/TCE Intermediate <input type="checkbox"/> VITA/TCE Advanced <input type="checkbox"/> VITA Military <input type="checkbox"/> VITA Foreign Student <input type="checkbox"/> VITA Puerto Rico <input type="checkbox"/> NOT Certified (ex. Greeter) | | | |

| Volunteer Information | Volunteer Certified Training Levels (Check all that apply) | Does this volunteer also work at another VITA/TCE site? | | If Yes, Indicate Site Name(s) |
|--|---|---|----|-------------------------------|
| | | Yes | No | |
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Privacy Act Notice

Our legal right to ask for information is 5 U.S.C. 301 and 26 USC 7801.

The primary purpose of asking for this information is to assist us in contacting you relative to your interest and/or participation in the IRS volunteer income tax preparation and outreach programs, and to identify your skills. We may provide information to volunteers who coordinate activities and staffing at taxpayer assistance sites. For more information about uses, see the Privacy Act Notice for the Taxpayer Assistance Reporting System (STARS) in the Federal Register: July 19, 2004 (Volume 69, Number 137) [Notices] [Pages 43055-43056].

Your response is voluntary. However, if you do not provide all or part of the requested information, the IRS may not be able to use your assistance in these programs.