

AMERICORPS PROJECT YES! 2016/2017 TIME SHEET

WEEK	10/13/16 to 10/26/16	MEMBER NAME	
-------------	----------------------	--------------------	--

DATE	TIME IN	TIME OUT	MEMBER SERVICE	DIRECT SERVICE	FUND-RAISING	SERVICE ACTIVITIES
THUR						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/13						

FRI						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/14						

SAT						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/15						

SUN						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/16						

MON						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/17						

TUES						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/18						

WED						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/19						

MEMBER NAME: _____

WEEK OF: 10/13/16 to 10/26/16

DATE	TIME IN	TIME OUT	MEMBER SERVICE	DIRECT SERVICE	FUND-RAISING	SERVICE ACTIVITIES
THUR						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/20						
FRI						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/21						
SAT						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/22						
SUN						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/23						
MON						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/24						
TUES						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/25						
WED						Supervised by: <input type="checkbox"/> In-Class Support <input type="checkbox"/> Out-of-Class Support <input type="checkbox"/> Community Meeting <input type="checkbox"/> School Meeting <input type="checkbox"/> Prep for Assignments <input type="checkbox"/> Volunteer Projects <input type="checkbox"/> Member Training <input type="checkbox"/> Member Support <input type="checkbox"/> OTHER: _____
10/26						

Member signature below verifies that time documented above is accurate. Site Coordinator/Director signature below verifies that time documented above is accurate and that member was supervised and assigned to approved tasks.

SIGNATURE**DATE**

AmeriCorps Member	1.	
Site Coordinator	2.	
Project YES! Director	3.	

MEMBER SERVICE	DIRECT SERVICE	FUND-RAISING	TOTAL HOURS