DOÑA ANA COUNTY HEAD START

Volunteer/Visitor Sign-In Log

	(Includes Bus/Classroom & F	ield Trip Volunteers)
Center:	 _	

		Type of Visitor					Official Use Only						
Date:	Printed Name	Signature	Р	S	F	FO	FGP	ST	Time In	Time Out	Total Hours	Rate	Total
													_

Staff Signature:	
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Please submit to Fiscal Specialist when complete. Fiscal Specialist will submit a copy to Word Processing Spec. at end of each month.

Original Filed in In-Kind

Volunteer/ADM/3.04 6.05 4.06 8.07 3.08 6.08 6.11

Legend: P = Parent/Grandparent

S = Student

F = Friend of Head Start

FO = Former Parent/Grandparent FGP = Foster Grandparent

ST = Staff