ACTIVITY SIGN-IN SHEET

County:	School:		Site coordinator:			
Title of event/activity:			Start time:	End ti	me:	
Date:	How much time did eac	h participant spend engag	ed in the activity?	hours and		minutes
	ject area: Origo student shadowing) Osummer programs		nprehensive mentoring Ofinancial aid couns kshops Ofamily/cultural events Ocounse			
	email Ophone Otext Oweb-confe texts and emails for which you had a two-		g recorded ent/parent (for example a response to your em	ail or a response to your	text message).	
WRITE NAME, GRADE AND <u>W</u>	/EIS (LUNCH) # Only West Virginia	a GEAR UP <u>students</u> need to sign	n in. Students should indicate how many paren	ts/guardians are attendir	ng with them.	
Student name		Grade	WVEIS (lunch) #	# Parents	legal guard	dians <u>with yoເ</u>
Ex. Sarah Ann Doe		12th	901111234	0	Ø 1	O 2 or more
1				0	01	O 2 or more
2				0	01	O 2 or more
3				O	01	O 2 or more
4				O	01	O 2 or more
5				O	01	O 2 or more
6				0	91	O 2 or more
7				0	O 1	O 2 or more
8				O	01	O 2 or more
9					01	O 2 or more
10				O O	01	O 2 or more
11				O	O 1	O 2 or more
12				O	O 1	O 2 or more
13				0	O 1	O 2 or more
14					O 1	O 2 or more
				0	O 1	O 2 or more
16				0	O 1	O 2 or more
SCRIBE data entry person:	SCRIBE data entry date:	:V	alidated by initials:	Validated by date:		
				We	est Virai	nia 📤

