



# Monthly Volunteer Time Log

The Oregon Department of Fish and Wildlife relies on volunteer hours to help fund its archery programs. The proper completion and submission of this form by all program contributors is critical to the Department's ability to maintain this effort.

Each person who assists in this program must complete, sign, and submit their own time log.

Name: \_\_\_\_\_

Event type:       NASP®       S3DA       Other: \_\_\_\_\_

**MONTH:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_

Date of Month	Hours of Preparation Time	Hours of Activity / Class Time	Hours of Travel Time	I was paid by my employer for the time I worked	I worked as an unpaid volunteer
1				<input type="checkbox"/>	<input type="checkbox"/>
2				<input type="checkbox"/>	<input type="checkbox"/>
3				<input type="checkbox"/>	<input type="checkbox"/>
4				<input type="checkbox"/>	<input type="checkbox"/>
5				<input type="checkbox"/>	<input type="checkbox"/>
6				<input type="checkbox"/>	<input type="checkbox"/>
7				<input type="checkbox"/>	<input type="checkbox"/>
8				<input type="checkbox"/>	<input type="checkbox"/>
9				<input type="checkbox"/>	<input type="checkbox"/>
10				<input type="checkbox"/>	<input type="checkbox"/>
11				<input type="checkbox"/>	<input type="checkbox"/>
12				<input type="checkbox"/>	<input type="checkbox"/>
13				<input type="checkbox"/>	<input type="checkbox"/>
14				<input type="checkbox"/>	<input type="checkbox"/>
15				<input type="checkbox"/>	<input type="checkbox"/>
16				<input type="checkbox"/>	<input type="checkbox"/>
17				<input type="checkbox"/>	<input type="checkbox"/>
18				<input type="checkbox"/>	<input type="checkbox"/>
19				<input type="checkbox"/>	<input type="checkbox"/>
20				<input type="checkbox"/>	<input type="checkbox"/>

Please turn over and complete back side

Date of Month	Hours of Preparation Time	Hours of Activity / Class Time	Hours of Travel Time	I was paid by my employer for the time I worked	I worked as an unpaid volunteer
21				<input type="checkbox"/>	<input type="checkbox"/>
22				<input type="checkbox"/>	<input type="checkbox"/>
23				<input type="checkbox"/>	<input type="checkbox"/>
24				<input type="checkbox"/>	<input type="checkbox"/>
25				<input type="checkbox"/>	<input type="checkbox"/>
26				<input type="checkbox"/>	<input type="checkbox"/>
27				<input type="checkbox"/>	<input type="checkbox"/>
28				<input type="checkbox"/>	<input type="checkbox"/>
29				<input type="checkbox"/>	<input type="checkbox"/>
30				<input type="checkbox"/>	<input type="checkbox"/>
31				<input type="checkbox"/>	<input type="checkbox"/>

**For those paid by their employer:** My hourly salary, including benefits, is: \$ \_\_\_\_\_  
This information is critical in providing ODFW archery programs with in-kind match funding.

I am the:       Lead Instructor       Assistant Instructor

By signing below, I confirm that the above information is accurate and complete.

\_\_\_\_\_ \_\_\_\_\_  
*Signature of Volunteer Instructor* *Date*

School / organization name: \_\_\_\_\_

**To be completed ONLY by the lead instructor - No student should be counted twice:**

Number of previous participants:

+

ADD Number of new participants taught during this month:

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\*Total (cumulative) number of participants:

\* Intent is to track total number of unique students taught over the course of a calendar year beginning July 1 and ending June 30. No student should be counted twice.

Cumulative number of males: \_\_\_\_\_ Cumulative number of females: \_\_\_\_\_

Once completed, please return to: Oregon Department of Fish and Wildlife  
Archery Education Program  
4034 Fairview Industrial Dr. SE  
Salem, OR 97302  
Janice.B.Copple@state.or.us  
(503) 947-6019