



AmeriCorps

AmeriCorps Member Service Log

I, _____
accompanied this member during the following dates:
_____ to _____.

Signature

Date

Accompaniment information must be completed for ALL members who have not received one of the background check results back (FBI or Illinois)

Name _____	Service for the week(s) of _____
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Date	Activity Code	Location	Morning Hours			Afternoon Hours			Total Hours	Activity Hours		
			Time In	Time Out	# of Hours	Time In	Time Out	# of Hours		Fund Raising	Training	Direct Service
Total Hours												

_____ Member Signature Date	_____ Site Supervisor Signature Date
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- MUST breakdown all hours as Fundraising, Training or Direct Service
- Cannot alter timesheet after it has been submitted, requires corrected timesheet to be submitted
- No whiteout is accepted, this is a legal timekeeping document
- Must use pen