

## Program Aide (PA) /Volunteer in Training (ViT) Time Log

Girl Name:					Troc	p #:	
Troop Leader	<u>or</u> Parent/Gua	rdian Nam	e:				
Troop Leader	or Parent/Gua	rdian emai	il:				
Date of time lo	og submission:				Note: this tir	ne log she	eet may be copied.
Circle one:	Cadette	PA	Senior	VIT	Ambassador	(VIT)	

Date xx/xx/xx	Activity Provide some applicable details for each activity.	Volunteer or Parent/Guardian* Signature	Hours
Indicate here 1 page only	if this time log contains multiple pages:  (or) Multiple pages	Total Hours (on this page)=	

<sup>\*</sup> Parent/Guardian signature is only accepted if this girl is officially designated "IRM" individually registered member.

Submit your completed time log to <a href="mailto:customercare@gssef.org">customercare@gssef.org</a> for approval.