



HOURLY WORK LOG PUPPETRY PROGRAM

Team Member 1: _____ Date: _____

Team Member 2: _____ Region: _____

Instructional Team Leader: _____

School: _____ Grade level: _____

Week worked: Starting date: _____ Ending date: _____ No. days: _____

TOPICS PRESENTED TO MIGRANT CHILDREN:	HOURS
Substance Abuse: Tobacco, alcohol, drugs, etc.	
Safety (water, fire, personal)	
Hygiene (dental, personal, healthy bodies)	
Nutrition	
Self-Esteem	
Other (Please specify: _____)	
Presentations Total>	
Preparation Time	
Scheduling Presentations: _____ Hrs. Phone Contacts: _____ Hrs.	
Meetings: _____ Hrs. Paperwork: _____ Hrs. Other: _____ Hrs.	
Travel Time Total>	
	Subtotal>
Inservice Training, Workshops Hours Received>	
	Grand Total>

Reviewed and approved by : _____

Instructional Team Leader Signature

Date: _____