

Georgia Project WILD In-Kind Services Form

Instructions: Please document the time you spend planning a Project WILD workshop, conducting a Project WILD workshop, training for Project WILD and traveling to and from the workshop. For each day of activity, write your name, the time you began the activity, and the time you ended the activity and the total hours spent on the activity. Please do not include meals or break times in the total hours. Finally, sign for each day's activity and total the hours at the bottom of the table. This information will help ensure that we continue to qualify for and receive funding for Project WILD.

Workshop: _____

Date	Name (Please Print)	Time		Hours	Signature
		Start	Finish		
Total Hours:					