BEAR RIVER HEAD START
PARENT COMMITTEE MEETING
SIGN IN SHEET

Location of Meeting: _____

Date of Meeting: _____

Parent Committee Meeting Begin Time: **End Time:**

Adults in Attendance *Adultos Están Presentes* *Please list one adult per line. *Por favor, indique un adulto por línea.*	**How Parent Assisted Staff** *Como el padre ayudo al Personal de HS/Empleados*	**Time Assisting at Meeting/Activity** *Tiempo Ayudando con la Reunión / actividad*	**Preparation Time** *Horas de Preparación*	**Miles Round Trip** **(*Not reimbursed by BRHS*)** *Millas alrededor Viaje (*No reembolsable por BRHS*)*	**Travel Time** *Tiempo de Transporte a la reunión/actividad*

*Countable In-Kind time for Parent **time assisting** with meeting or activity, setting up, preparing or serving food, cleaning up, helping with the activities or in any other way being an assistant. Some Parents may be counted as assistants the whole time depending on the number of assistants required based on the adult/child ratio according to age and developmental appropriateness/performance standards and licensing requirements
*Countable In-Kind time for **preparation time** includes calling other parents, finding location, activity prep, etc.

FOR OFFICE USE ONLY

Totals: Total # of Adults: _____

Total In-Kind Minutes: _____Total In-Kind Miles: _____

x Minutes of Meeting: _____

= Total Meeting Minutes: _____

Staff Signature: _____

+ Time Assisting in Minutes: _____

Staff in Attendance: _____

+ Preparation Time in Minutes: _____

_____

+ Travel Time in Minutes: _____

Staff Comments: _____

_____