

LA GEAR UP Individual Time/Effort Form

Name: _____ Title/Role: _____ Time Period: _____

School/Organization: _____ District: _____

As mandated by the U.S. Department of Education, LA GEAR UP must report volunteer time that is linked with the 7th and 8th graders at most* LA GEAR UP schools. Volunteer time is another way of reporting match associated with our schools.
 *(Sabine 6th-12th and ReNEW Accelerated High School 9th-12th)

Please share the attached Individual Time and Effort form with school personnel that may donate or volunteer their time to the LA GEAR UP cohort as mentioned above. If necessary, additional duties may be added. **Individuals should use this form only if they are not compensated with LA GEAR UP funds or any other federal funds for donating their time to the LGU cohort.** Please Note: Teachers working on GEAR UP activities during lunch and outside contract time may count the hours as match. Administrators, Counselors and Office Personnel may count a % of contracted hours as GEAR UP match for the amount of time working with GEAR UP students, parents, partners and staff. If you would like to use the standard volunteer rate of pay you can find it here:
<https://www.independentsector.org/resource/the-value-of-volunteer-time/>

Activity Examples-

- Administrative Duties: Student documentation, organizing events/fieldtrips, phone calls, copies, collecting data, entering Egnyte or Jotform data, filing, parent communication, organizing GEAR UP space, etc.
- Mentoring/Tutoring: Remediation, intervention, etc.
- Meeting Duties: GEAR UP meetings with staff, students, parents, collaboration, etc.
- Activity Duties: Chaperone GEAR UP, participation in GEAR UP activities, participate in GEAR UP professional development, award recognition night, family or community night, partner activities, etc.

List Activities and/or Description	Date	Hours*	Total Rate of Pay
*You may report a specific date w/ specific hrs (e.g. Chaperone on University field trip 1/23/18 – 3 hrs) OR monthly activity w/ average hrs per month (e.g. Lunch tutoring and intervention Sept.-May –12 hrs per month)			
Total Hours, Rate of Pay & %			

The information provided on this form is an accurate estimate of the time/effort I contributed to the GEAR UP program.

Individual's Signature: _____

Date: _____

Supervisor's Signature: _____

Date: _____