Partners in Policymaking®

Class 29

Time/Match Record

For time period _____ **to** _____
Month, Date and Year Month, Date and Year

We value the time you spend between weekend sessions to complete homework assignments, driving to/from class sessions, review the packet of resource materials you received and communicate/exchange information with policymakers on disability related issues.

This time is converted to dollars based on your hourly wage if you are employed; or minimum hourly wage if you are unemployed, or working but not receiving at least the minimum hourly wage ($7.25/hour).

You will not be paid for this time, but the information you provide in this form helps us meet the match requirement for the grant that funds the Partners in Policymaking program. To the best of your ability, please estimate the time you spend working on each activity.

DATE	TIME	# OF HOURS	ACTIVITY i.e. homework, contacting someone, reading resource packet, etc.	HOW DID YOU ACCOMPLISH THE ACTIVITY? (phone, fax, letter, meeting, etc.)
TOTAL HOURS:				

- Sign and date this form in the spaces below.
- Fill in your current hourly wage if you are employed.
- If you are unemployed, write “none”.
- Bring this completed form with you to the next weekend session.

PARTNER’S NAME (print) _____ DATE _____
HOURLY WAGE $_____ (If unemployed, write “none”!)