TEXAS TEENS IN THE DRIVER SEAT® CUP



School Name: _____

To whom it may concern,

The attached activity forms, submitted by the TDS Sponsor/Advisor, are accurate and complete. I confirm that all volunteer hours submitted to Teens in the Driver Seat are true and accurate to the best of my knowledge. I also acknowledge that all the volunteer hours can count toward federal in-kind match dollars, which is currently valued at \$25.11 per hour, per person (which included both teens and adult volunteers).

Signature
Title

TEXAS TEENS IN THE DRIVER SEAT[®] CUP SIGN-IN SHEET

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te:	Start time:	End time:
ase i	ndicate when this event/activity was he	ld: 🔲 Before or After School 🔲 Lunch
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