

## ALA Junior Volunteer Log

		Junior Member Name:		_ Unit # District:	
<u>Date:</u>	Hours	Event/Activity/Program	ALA Committee	Description of Vol. hrs.	Printed Name of Adult Supervisor
В	l By signing your 1	 name you are verifying that the hours listed	I d are true and accurate. When lo		st 15 min. increments (i.e.= .25/.5/.75)

Signature of Junior Member

Date\_