Student Event Log

Use this form to document participation in GEAR UP Iowa events. After form data is recorded in SCRIBE, retain this form as mandated by grant requirements. The form must be accurate and legible. Signature must be handwritten or a verifiable electronic signature.

Name of Activity:_____ **Date of Activity:**_____

Duration of Activity: _____ **to** _____ **Destination (if traveling):**_____

Meal/Refreshments Provided:☐ **Yes** ☐**No**

Student (First & Last Name)	Student (First & Last Name)

GUI Event Coordinator Signature:_____ **Date:**_____

(Attach additional sheets or student list as needed.)