



**FISHKS - ACTIVITY REPORT FORM**  
 (MUST BE FILLED OUT COMPLETELY - one form per day)



#	OR		
Organizing Instructor #		Organizing KDWPT Employee	Date of Event

EVENT LOCATION: \_\_\_\_\_

EVENT LENGTH (HOURS) \_\_\_\_\_ TOTAL NUMBER OF PARTICIPANTS: \_\_\_\_\_

EVENT TYPE (CHECK ONE):

- Angler Instructor Course;  Fishing Clinic;  Fishing Derby;  Mobile Aquarium;  School Program;  Outreach;  
 Advanced AE (explain) \_\_\_\_\_  Other (explain) \_\_\_\_\_

Giveaway Items: \_\_\_\_\_

**VOLUNTEERS PARTICIPATING IN THIS EVENT: All instructors, including guest instructors, must verify their hours participated by signature**

Volunteer Category (General, Youth, Jr Amb #, Instructor #)	VOLUNTEER'S NAME (PRINT LEGIBLY)	PREPARATION HOURS (Time to prepare and close out an event on <u>day of event</u> )	Personal Vehicle Miles	EVENT HOURS (Time during the event)	VOLUNTEER'S SIGNATURE <i>(Must sign to be valid)</i>

I, **the organizing instructor or KDWPT employee**, hereby certifies that all volunteers reported herein assisted with a FISHKS event and that this is a complete and accurate final report on the course.

Organizing Instructor Signature \_\_\_\_\_ Date \_\_\_\_\_ Aq Ed Coordinator Signature \_\_\_\_\_ Date \_\_\_\_\_

Return original copy to the attention of David Breth, KS Dept. of Wildlife, Parks & Tourism, 512 SE 25<sup>th</sup> Ave., Pratt, KS 67124.

Fax: (620)672-2972. david.breth@ks.gov

Eligible for 2020 Events