**[DEPARTMENT NAME]**

**[Department/FC Program Logo]**

**Individual Time Log**

*Please fill out the following form with your name, the name of each activity performed, the date when each activity took place, and the time spent performing each activity. This information is vital for the records of the [Fire Corps Program Name].*

**Name**

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| --- | --- | --- | --- | --- |
| **Activity** | **Date** | **Time In** | **Time Out** | **Total Time** |
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