

WA State GEAR UP Family Workshops, Orientations & Celebratory Events



GEAR UP Staff Name:		School Name:	
Name of Activity:		Date Activity:	
Activity Type:	<input type="checkbox"/> Family Financial Aid Workshop <input type="checkbox"/> Family Workshop (non-F/A) <input type="checkbox"/> Family Orientation or Celebratory		

	Student Name (Printed)	Student Attended? (Y)es or (N)o	Family Member Signature (Required)	Student Grade- Level
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

I certify that the above students and family members participated in this activity.

GU Advisor Signature _____

Date _____