

OFFICE USE ONLY

HQC approval: _____

Date form received: _____

PFA Confirmation of Logged Hours Form

Please complete this form and send to PFASubmission@hqc.sk.ca within 72 hours of any activity/event that engages PFAs.

Meeting/Event information

Name of activity/meeting/event: _____

Date: _____

Duration of Meeting (ex. 1 hour): _____

Program (please check and fill in the program budget code)

SCPOR: _____

Sprout Grant: _____

PEADA award: _____

STEP Program: _____

HQC PFCC Guiding Coalition: _____

HQC CQIP: _____

HQC AQIP: _____

Other: _____

PFA Attendees – Information and Confirmation of Attendance (Please use page 2 for additional PFA attendees)

PFA Name	Did the PFA attend the event?		Is the PFA eligible for expense claim?		Pre-Expense Authorization # Complete only for PFAs who will travel and incur expenses for meals, mileage, and/or accommodations	Office Use Only		
	Yes	No	Yes	No		Honoraria claimed	Expense Claimed	Entered in Db for Reporting Purposes

Meeting Chair/Facilitator/Principal Investigator signature: _____

Date: _____

