



ANGLER EDUCATION INSTRUCTOR TRAINING ROSTER



Workshop Type: Angler Edu Instructor (AED) Fly Fishing Instructor (FF) AED/FF Combo

Lead Instructor: _____ Lead Instructor e-mail address: _____

Lead Instructor Signature: _____ Lead Instructor Vol Hours*: _____ Date Signed: _____

(*If reporting for more than one day, use an instructor timesheet, page 3)

Workshop Date(s): _____ Start/End Times: _____ - _____ Facility: _____ City: _____

Facility Type: City/Community/County Park Church/Rel Bldg. Community/Public Bldg. College/Univ Nature/Env Edu Ctr
 School/ISD Site Scout Facility/Youth Camp TPWD Site or Park Virtual/Online Other

FOR TPWD USE ONLY:		Participant Legal Name (Name as entered on TPWD profile) Please Print	Phone number	Email	Male/ Female	Ethnicity (circle one) AS-Asian; AI-American Indian/Alaska Native; B-Black/African American; Ha-Hawaiian/Pacific Islander; Hi-Hispanic; O-Other; W-White
Profile	CBC					
		1				
		2				
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		13				
		14				
		15				

REPORT SUMMARY: Total Males: ____ Total Females: ____ Certification Hours: ____

INSTRUCTIONS FOR LEAD INSTRUCTOR: Submit workshop report online *within 2 weeks* at www.tpwd.texas.gov/volunteer Upload workshop roster, volunteer sign-in sheet and timesheet.

Texas Parks and Wildlife Department maintains the information collected through this form. With few exceptions, you are entitled to be informed about the information we collect. Under Sections 552.021 and 553.023 of the Texas Government Code, you are also entitled to receive and review the information. Under Section 559.004, you are also entitled to have this information corrected. For assistance call 800-792-1112.



TPWD Angler Education Certified Instructor Timesheet

Instructors may use this form to report hours for multiple days. Use one timesheet per person, per month.
A completed timesheet may be submitted in lieu of itemized hours on an online report.



Instructor Name (Please Print): _____ Report Month: _____ Year: _____

Class/Event Name: _____ Class/Event Date(s): _____

Facility Name: _____ City: _____

Were you the Lead Instructor? Yes No - If No, who was lead? _____

- Class/Event Type: Basic Angler Advanced Angler Basic/Adv Angler Fishing Outreach
 Beginning Fly Fishing Intermediate Fly Fishing Beg/Int Fly Fishing Fly Fishing Outreach
 Specialty Clinic (Conventional or Fly Fishing) Instructor Workshop

Class/Event Notes:

Day Of Month:	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total Hours	
Class/Event Prep																																	
Conducting Class/Event																																	
Wrap-up/Clean Gear																																	
Total Hours:																																	

I hereby certify this information to be true and accurate.

Instructor's Signature: _____ Date Signed: _____

Scan me to report now!



Upload this timesheet with your online report at www.tpwd.texas.gov/volunteer

Or send via email to: AnglerEdu@tpwd.texas.gov

TPWD Angler Education, 4200 Smith School Road, Austin, TX 78744 - Phone: 512-389-8183; Fax 512-389-8673

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