



## Pechanga Tribal TANF Program Client Work Activity Log

Weekending _____	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Life Skills Training/Education							
Unsubsidized Employment							
Job Search & Readiness Assistance							
Culturally Relevant Work Activities							
Family Formation & Parenting Activities							
Other:							
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Job Search & Readiness Assistance							
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Other:							

**For The Month of:**  
\_\_\_\_\_

**Reminder:**  
Penalties and Sanctions will be imposed for failure to meet your assigned work participation hours and hours not turned in. Only hours verified and documented on your work plan will be accepted.

\_\_\_\_\_

**Client Name(Print):**  
\_\_\_\_\_

**Clients Signature:**  
\_\_\_\_\_

**Date:**  
In signing this work activity log I declare that all information is accurate and correct, I understand that submitting false information can jeopardize my eligibility for Tribal TANF assistance.

\_\_\_\_\_

**PTTP Caseworker Signature:**  
\_\_\_\_\_

**Date:**  
\_\_\_\_\_

**Remember to Attach  
All Verifications**