



# HICS 252 - SECTION PERSONNEL TIME SHEET

<b>1. Incident Name</b>	<b>2. Operational Period (# )</b> DATE: FROM: _____ TO: _____ TIME: FROM: _____ TO: _____
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**3. Time Record**

#	EMPLOYEE (E) VOLUNTEER (V) NAME (PRINT)	E / V	EMPLOYEE NUMBER	RESPONSE FUNCTION SECTION / ASSIGNMENT	DATE / TIME IN	DATE / TIME OUT	TOTAL HOURS	SIGNATURE (TO VERIFY TIMES)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

<b>4. Prepared by</b>	PRINT NAME: _____	SIGNATURE: _____
	DATE/TIME: _____	FACILITY: _____



**Purpose:** Record each section's personnel time and activities  
**Origination:** Hospital Incident Management Team (HIMT) personnel as directed by Incident Commander or Section Chief  
**Copies to:** Time Unit Leader