## MONITORED VOLUMES OF SOLID WASTE BINS SAMPLE ELEMENTARY RECYCLING PROGRAM

School Site:	
Bin Size:	
No. of Bins On Site	

Week Ending:					
Bin #	Monday	Tuesday	Wednesday	Thursday	Friday
1					
2					
Week Ending:					
Bin #	Monday	Tuesday	Wednesday	Thursday	Friday
1					
2					

## Contacts:

Program Coordinator: Name: email: phone:

## **Technical Contact:** Name: email: phone: fax:

KEY:

1/4 Bin Quarter Filled
1/2 Bin Half Filled
3/4 Bin Three Quarters Filled
Full Bin Full
R Remarks - explain
\* Waste Pick Up Day