

PROFESSIONAL DAY ACTIVITIES

- INFO re APPROPRIATE USE OF PROFESSIONAL LEAVE DAYS** (see 10.2.10):
- 1) Leave Days are limited to using a maximum of 1 day per year.
 - 2) Teachers are eligible to earn a maximum of two (2) Professional Days per year.
 - 3) The activity proposed must be a district endorsed activity and be outside of the range of activities normally associated with the professional responsibilities of a teacher.
 - 4) The benefit from the activity proposed must be primarily district-wide and occur before or after school.
 - 5) Prior authorization is required, so check in advance with your Principal if there is any question of approval.

NAME: _____ **EMPLOYEE I.D.#** _____ **SCHOOL:** _____

DIRECTIONS: For the planned activity please check the appropriate box, provide estimated hours and have your principal initial the activity proposed. Following the activity, provide dates, actual hours, location, and have your principal sign their approval at the bottom of this form. Thank you

- School Planning Teams and Design Teams _____
- District Computer Committee _____
- Poetry Anthology Committee _____
- Retreats _____
- Authorized production work in schools (SPT Handbook, School of Excellence Applic. _____
- Authorized Student Club / Enrichment Activities _____
- Authorized Curriculum Comm / Enrichment Activ./District-Wide Exam Dev _____
- Policy Boards _____
- Peer Coaching Support Group meetings _____
- Monitoring (part of the formal building review process) _____
- Screening and Interview Committee _____
- Authorized Presentations made by teachers after hours (not otherwise compensated) _____
- Authorized Standardized Test correction _____
- Extended hours discipline/supervision of students _____

Est. Hrs

Description of Above Activities	Specific Dates of Activity	Actual Hours	Location of Activity
TOTAL HOURS			

(Please list additional activities on the back of this form if needed.)

I am applying for **(circle one)** .5, 1, 1.5 or 2 Professional Day(s).

Teacher Signature: _____ Date: _____

Building Principal’s Approval: _____ Date: _____