

CERTIFIED/ADMINISTRATIVE EMPLOYEE LOG OF PROFESSIONAL DEVELOPMENT HOURS

(This form must be submitted to your supervisor prior to the last day of each school year.)

SCHOOL YEAR: _____	EMPLOYEE: _____			
ACTIVITY	CATEGORY*	DATE	# OF HOURS	TOTAL HOURS

Employee Signature _____	Date _____	Supervisor Signature _____	Date _____
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Category 1: Classroom Management	engaging students, norms for social interaction, student/parent/community communications, peer coaching, etc.
Category 2: Instructional Delivery	growth/assessment strategies, best practices, differentiating instruction, remediation and/or extension, designing effective lessons, etc.
Category 3: Other	all other activities that do not fit into category 1 or 2.

