

ACCOUNTABILITY FORM FOR PROFESSIONAL GROWTH DAYS

School Year _____ - _____

Activity Description	Date Attended or Completed	Length of Activity (i.e., hour, ½ day, full day)	Documentation
			<input type="checkbox"/> sign-in sheet <input type="checkbox"/> prior approval form submitted <input type="checkbox"/> certificate (attached) <input type="checkbox"/> other (attached)
			<input type="checkbox"/> sign-in sheet <input type="checkbox"/> prior approval form submitted <input type="checkbox"/> certificate (attached) <input type="checkbox"/> other (attached)
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Teacher Signature

Date