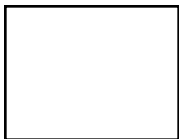


**EXTENDED EMPLOYMENT ACTIVITY LOG
SUMNER COUNTY SCHOOLS - CTE DEPARTMENT
2018-2019 SCHOOL YEAR**

Teacher's Name: _____ Department: _____

School: _____

	Date of Activity	Hours of Credit Claimed	Number of Students Served	Specific Description of Activity
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
16				
17				
18				
19				
20				
	Totals			



**TOTAL
DAYS
CLAIMED***

Teacher's Signature

Date

CTE Principal's Signature

Date

CTE Coordinator's Signature

Date

* Days may only be claimed in .5-day increments

Payroll Date