

## Sign in Sheet - Camas Education Association Professional Development Hours

This sheet is two pages long when printed. Print both pages (front-to-back is fine). Complete, collect signatures, and return via district courier to Karl Swanson at ZAC.

<b>Course/Workshop Title:</b>	
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<b>Presenter/Facilitator Name:</b>		<b>Date:</b>	
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**Sponsoring Organization:** *(Select below)*

<input type="checkbox"/> <b>Camas School District</b>	If sponsored by CSD: PD@CSD Course #: <input style="width: 100px;" type="text"/>	
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<input type="checkbox"/> Educational Service District 112 (ESD 112)		
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<input type="checkbox"/> ESD other than ESD 112: _____*	If sponsored by an ESD: Course Clock Hour #: <input style="width: 100px;" type="text"/>	<i>(To verify the course only. Participants who want clock hours from the ESD still must sign in with the ESD and complete clock hour paperwork.)</i>
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<input type="checkbox"/> An Oregon ESD: _____*		
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<input type="checkbox"/> The Office of Superintendent of Public Instruction (OSPI)*		
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<input type="checkbox"/> Camas Education Association (CEA), WEA Riverside Uniserv, or Washington Education Association (WEA) - [Check which one]*		
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<input type="checkbox"/> Professional Educator Association (e.g., National Council of Teachers of Mathematics, American School Counselors Association):*		
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Name: _____		
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<input type="checkbox"/> Other Professional Organization (e.g., Center for Strengthening the Teaching Profession, College Board, Center for Teaching Quality):*		
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Name: _____		
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**\*If the course is not sponsored by ESD 112 or Camas School District, please attach VERIFICATION of your attendance at the event for each participant who signs below.**

Verification can include one of the following:

A certificate of completion provided by the event sponsor; A copy or digital photo of the sign-in sheet for attendance at the event; A copy of a completed, signed clock hour form from the event; A receipt or other paperwork verifying enrollment/attendance/participation; If you have alternative forms of verification, please confirm their acceptability

PRINT first name	PRINT last name	Signature - Sign BELOW in ink	Building	outside of contracted hours	Reserved for Payroll
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**In order to be paid from your 14-Hour Allocation, your name needs to be readable.**

1					
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PRINT first name	PRINT last name	Signature - Sign BELOW <b>in ink</b>	Building	Number of hours outside of	Reserved for Payroll
<b><i>In order to be paid from your Professional Development Allocation, your names need to be readable.</i></b>					
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<b>Submit to Kari Swanson at ZAC. District Office Approval Signature:</b>					