|  |  |
| --- | --- |
| In-Service Title:  | Scheduled Time:  |
| Date:  | Campus/Department:  |
| Workshop#: | Site / Room: |
| Contact Person:  | Audience:  |
| Administrators’ Signature |  [ ]  Elementary [ ]  All Levels [ ]  Secondary  |  No. of CPE Hours: |  [ ]  CPE [ ]  Stipend |
|  | **Employee Number** | **Name (PRINT)** | **Campus Name** | **Signature** | **IN** | **OUT** | **IN** | **OUT** |
| **1** |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |
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| **10** |  |  |  |  |  |  |  |  |
| * **ORIGINAL SIGN IN SHEETS FOR REQUIRED DISTRICT & CAMPUS STAFF DEVELOPMENT DAYS & TEA TOPICS MUST BE SENT TO THE PROFESSIONAL DEVELOPMENT DEPT.**

Sign-in sheet is recommended for documentation of attendance at all BISD sessions. This record will be retained for 5 years. BISD RECORD:Item 1050-28sig. |
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