ΡI	FASE	SIGN	IN RFI	OW I	JNDER	DATF.

Title of Professional Development:
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School:	
Minimum Requirement:	10 hours of training for 1.0 CEU

Names of Participants	Date:	Date:	Date:	Date: hours	Date:	CEU's
(Please type in roster list of names)		hours	hours	hours	hours	

ΡI	FASE	SIGN	IN RFI	OW I	JNDER	DATF.

Title of Professional Development:

Names:	Date:	Date:	Date:	Date:	Date:	
(Please type in roster list of names)	hours	hours	hours	hours	hours	
					· · · · · · · · · · · · · · · · · · ·	