

CARLISLE LOCAL PROFESSIONAL DEVELOPMENT COMMITTEE

Summary Sheet

PROFESSIONAL ACTIVITIES LOG

Name: _____

To be completed by educator as your paperwork is submitted. Once all activities are logged in then submit this sheet to LPDC: Make copies as needed

ACTIVITY	DATE(s)	NUMBER	CONTACT	EXPLANATION
		of CEU s	HOURS	
Example: Inservice Workshop	8/26/02		6 hours	presentation on district goals

TOTAL HOURS: _____