



Rome City School District
Continuing Professional Development Building Level Form

Directions: Please fill out and have signed by your supervisor/building administrator when you participate in any meeting, workshop, or activity, which could be deemed as contact time toward your professional development hours.

You are responsible for making sure **ALL** information is filled in completely. Records should be kept as current with activity completion as is possible. Records must be kept seven years and be made available to the NYS Education Department in the event of an audit.

Check One: ☐ Teacher
☐ TA

Name _____ Building _____

Subject/Grade Level _____

Date	Activity	Location/Provider	Clock Hour Equivalent (Est.)	Presenter's Initials

Principal/Administrator's Signature _____ Date _____