

FLEXIBLE INSERVICE CREDITS

Name _____ School _____ School Year _____

DIRECTIONS: Please enter on this form all inservice activities that you desire to apply toward flexible inservice credits. This form is to be turned in to your principal throughout the school year, **when you have completed the six hours**. It is recommended that you keep a copy for your records. **Do not forward this form directly to the Central Office. Your principal will forward this form as part of a school set.**

Date of Activity or Activities	Description of Activity or Activities	Specific Location of Activity or Activities (to include City/State)	Specific Times of Attendance

Deadline to turn in form to the school principal is May 4, 2010.

Teacher

Signature/Date