GM General McLane School District

Completed by any teacher requesting Act 48 credit for cohort activities. Submitted to principal in May

Act 48 Individual Time Log

Name: _____ Building: _____

Group: _____ PP ID: _____

Date	Session Topic	Number of Hours

_____ _____

Signature of Facilitator **Signature of Teacher**

* To be kept on file in each building for the remainder of the Act 48 cycle.