## Northern New England Conference Teacher Monthly Report

Name:	ame:															Phone:					
Address: City: School: For Mon													State:		Zip:						
									Aontl					Year:							
Description		a.	Activities School Personal								Financial Authorized Travel			Office Use Only							
	Date	T= Teacher V X = School in H = Holiday SN = Snow D	Vork Day Session $P = Person$ $S = Sick$		al Day		Meetings (School Board,	Field Trips,	Parent/			Authoriz	ed Travel								
		AM	PM	AM	PM	Homes Visited	Home & School)	Programs, Etc.	Teacher Conf.	Fire Drill	Mileage	Room	Meals (per diem)	Tolls		Pay code	Amour				
	2														Certification	11602	-				
	3																<del>                                     </del>				
	4																				
	5														Graduate Study	11412					
	7										-				Dep Tuit-Teach	11400	<del>                                     </del>				
	7 8																╁				
	9														Travel-Special	11300	t				
	10																				
	11																				
	12																				
	13			<u> </u>											Advance	33000	<del> </del>				
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	16																				
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	29														Wellness Prog.	10606					
	30																-				
Tota	31																+				
(please total all colum	ns)																<del>                                     </del>				
Request or Commen	ıts	:		<u> </u>							Upcon	ning sch	nool vac	ation o	contact numb	oer:	<u></u>				
												pprov									
Inspirational Experie	an	CO: /	on c/ C	tha -¹	, mos := \						Com	ments	S:								
mspiranonai Experi	11ات	CC. (In	or out of	tne class	sroom)																
											_										
Accomplishments:																					
Successful this mon	. 1							<u> </u>			No		1		☐ Yes						