



Fairfax County Public Schools

*Teacher Researcher
2009-2010 Monthly Substitute Leave Form*

School Name: _____

Group Leader[s]: _____

Directions: This form is to be used by teacher-researcher school groups as a record of the substitute hours provided by the FCPS Teacher-Researcher Network to support school groups. **Please type the information on this sheet and then send electronically in September and January to Marcey Lopez, PLT Dep't, Dunn Loring Center.** Hard copies of the Time and Attendance sheets should be sent via Pony to Marcey.

Meeting # _____ Focus: _____

| Date | Teacher's Last Name | Substitute's Last Name | |
|-------|---------------------|------------------------|-----------|
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | _____ | 3.5 hours |
| _____ | _____ | None Needed | 0 hours |