

Copley-Fairlawn City Schools  
Event/Meeting Sign-In Sheet

**Event:** *(Circle One)* RTI IEP Other-Explain: \_\_\_\_\_

**Student Name & Grade:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Administrator that Authorized Meeting:** \_\_\_\_\_

**Start Time:** \_\_\_\_\_ **End Time:** \_\_\_\_\_

Teacher Sign In	Building (Circle one)	Hours in attendance	Office Use Only
			Compensation \$25.00 hour/per Negotiated Agreement
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
Tutor Sign In			Compensation per Negotiated Agreement (Paid to closest 1/4 hour)
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$
	A/FI/H/MS/HS/PS		\$

**Return to Asst. Superintendent's Office immediately following event. Authorized by:** \_\_\_\_\_

**Approval of Assistant Superintendent:** \_\_\_\_\_ **Date:** \_\_\_\_\_