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## DUE: January 25th, 2019

## 2018-2019 School Year PHYSICAL EDUCATION TEACHERS: GRADES 9-12 (11/19/2018-12/21/2018) 22 Days

**Second Quarter: Grade Report** 

Name:		Employee ID#	School	l:	School Code#:	
Please	indicate the number	of students that EX	CEED the class lim	its. The limit is 33 st	udents per class.	
	Monday	Tuesday	Wednesday	Thursday	Friday	TOTAL
1st Period						
2nd Period						
3rd Period						
4th Period						
5th Period						
6th Period						
7th Period						
8th Period						
	Total number of students over :					
<ol> <li>Label attached documentation with the day(s) and class period(s).</li> <li>Worksheet and documentation <u>MUST</u> match or your forms <u>WILL</u> be returned.</li> <li>Return this form and all supporting documentation to: Areal Jones, Total Rewards Specialist.</li> <li>PAYMENT WILL NOT BE MADE UNTIL THE COMPLETION OF THE 2018-2019 SCHOOL YEAR (ON OR BEFORE JULY 15, 2019).</li> <li>Only report number of students over.</li> </ol>						
SIGNATURES:	CTU Member:		Da	ate:		
	Chapter Chairperson	າ:	Da	ate:		
	Principal:			Date:		