

Principal/School:

Beep Time: 7:00am	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	_____ AP _____ Teacher _____ Student _____ Office/Administrative Staff	_____ Coach/Classroom Aide _____ Counselor/Psychologist _____ PTA/Community Member _____ Parent	_____ Vendor/Contracted Worker _____ Volunteer _____ District Office _____ Other

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Beep Time: 12:50pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 12:55pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Principal/School:

Beep Time: 1:00pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Beep Time: 1:05pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Beep Time: 1:10pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Principal/School:

Beep Time: 1:15pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Beep Time: 1:20pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Beep Time: 1:25pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Principal/School:

Beep Time: 1:30pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Beep Time: 1:35pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Beep Time: 1:40pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Principal/School:

Beep Time: 1:45pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	_____ AP _____ Teacher _____ Student _____ Office/Administrative Staff	_____ Coach/Classroom Aide _____ Counselor/Psychologist _____ PTA/Community Member _____ Parent	_____ Vendor/Contracted Worker _____ Volunteer _____ District Office _____ Other

Notes:

Beep Time: 1:50pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	_____ AP _____ Teacher _____ Student _____ Office/Administrative Staff	_____ Coach/Classroom Aide _____ Counselor/Psychologist _____ PTA/Community Member _____ Parent	_____ Vendor/Contracted Worker _____ Volunteer _____ District Office _____ Other

Notes:

Beep Time: 1:55pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	_____ AP _____ Teacher _____ Student _____ Office/Administrative Staff	_____ Coach/Classroom Aide _____ Counselor/Psychologist _____ PTA/Community Member _____ Parent	_____ Vendor/Contracted Worker _____ Volunteer _____ District Office _____ Other

Notes:

Principal/School:

Beep Time: 2:00pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Beep Time: 2:05pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Beep Time: 2:10pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	____ AP ____ Teacher ____ Student ____ Office/Administrative Staff	____ Coach/Classroom Aide ____ Counselor/Psychologist ____ PTA/Community Member ____ Parent	____ Vendor/Contracted Worker ____ Volunteer ____ District Office ____ Other

Notes:

Principal/School:

Beep Time: 2:15pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 2:20pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 2:25pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Principal/School:

Beep Time: 2:30pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 2:35pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 2:40pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Principal/School:

Beep Time: 2:45pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 2:50pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 2:55pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Principal/School:

Beep Time: 3:00pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 3:05pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 3:10pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Principal/School:

Beep Time: 3:15pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 3:20pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 3:25pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Principal/School:

Beep Time: 3:30pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 3:35pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 3:40pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Principal/School:

Beep Time: 3:45pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 3:50pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes:

Beep Time: 3:55pm	Task(s) _____	Activity Type _____	Location _____
With whom? (Note #)	<input type="checkbox"/> AP <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Office/Administrative Staff	<input type="checkbox"/> Coach/Classroom Aide <input type="checkbox"/> Counselor/Psychologist <input type="checkbox"/> PTA/Community Member <input type="checkbox"/> Parent	<input type="checkbox"/> Vendor/Contracted Worker <input type="checkbox"/> Volunteer <input type="checkbox"/> District Office <input type="checkbox"/> Other

Notes: