

**HAMBLEN COUNTY SCHOOLS  
COMPENSATORY TIME LOG**

**MONTH** \_\_\_\_\_ **YEAR** \_\_\_\_\_

**NAME** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_ **PRINCIPAL** \_\_\_\_\_

<b>ACTIVITY</b>	<b>TIME WORKED</b>	<b>DATE</b>	<b>APPROVED</b>

This form will be initialed by the immediate supervisor each time an activity is completed. The log will be due at the beginning of the school year, at the end of the first semester, and/or by May 10 (time will be submitted in units of at least one-half day). No comp. time can be used after May 10.