

**Service Time Log for Christina School District SY 2018-2019**

Vendor Name: POSITIVE DIRECTIONS II LLC School Name: School Name Here

Period Covered: ENTER PAY PERIOD Student Name: Student Name Here

Para Name: YOUR NAME HERE SUB FOR THEIR NAME HERE

Date	Hours	Service Type
8/27/18	6.5	One-on-One Para
<b>TOTAL</b>	<b>6.5</b>	

PRINCIPAL SIGNS HERE  
 Principal's signature \_\_\_\_\_  
 School: \_\_\_\_\_

SHEREE'S SIGNATURE  
 Vendor's signature \_\_\_\_\_  
 Date: \_\_\_\_\_