



INSTRUCTION/ADMINISTRATION INFORMATION

750 FIRST STREET, NE, SUITE 980
WASHINGTON, DC 20002-4241
TEL: (202) 336-6780
FAX: (202) 842-2593
WWW.ACICS.ORG

List your typical duties for a week. List all classes taught and other duties performed, indicating the number of hours spent doing each (D=day, e=evening (please circle)).

Subject Taught or Duty Performed	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

What percentage of your working time has been spent during the past month in:

Teaching 100 Administration _____ Counseling _____ Field Work _____ Other (explain) _____

PROFESSIONAL DEVELOPMENT INFORMATION (must include back-up documentation in faculty personnel file)

- Names, dates, and locations of methods courses or workshops attended in the past three years.
- Names, dates, and locations of conventions or educational meetings attended during the past three years.
- Organization and/or professional societies (related to your present position), in which you now hold membership.
- List visits made to prospective employers of your students, businesses, other schools, and/or related organizations during the past year.

I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE, TO THE BEST OF MY KNOWLEDGE.

Signature of Staff Member _____ Date _____