LPDC FORM 4

Equivalent Activity Log

Chesapeake Union Exempted Village School District

✓ **Form 3, Activity Proposal Form, must be pre-approved by LPDC prior to starting Equivalent Activity.**

Name _____ Date _____

Title of Activity _____

DATE	CLOCK HOURS	TASK

I certify that the information provided in this proposal is true and accurate:

Teacher Signature _____

_____Approved by LPDC

Signature of LPDC Chair: _____ Date_____