JUNE 10 EXIT REPORT

PLEASE CHECK EACH ITEM AS YOU COMPLETE IT.

Teacher Sch	nool
Your JUNE PAYCHECK is not earned until all items on this report, and any other requested materials, are completely and accurately filled out and received by the Office of Education.	
CUMULATIVE RECORD FOLDERS	
☐ Complete Student Information section	
☐ Attach student photo	
 ☐ Include current MAP Student Profile report ☐ Current student application form 	
☐ Student 4th Quarter Report Card	
☐ Pertinent diagnostic test results (i.e., academic, psycholog	gical, IEPs)
☐ Student Health and Immunization Records (May be filed s	eparately for privacy)
☐ Pathways Literacy Record Cards	
MISCELLANEOUS ITEMS	
☐ Borrowed materials returned to the Office of Education	
☐ Special Travel Report form (for reimbursable expenses) e☐ All school library books checked and put away	-mailed
☐ Bloodborne Pathogens course on Sterling Volunteers web	osite completed
TURN IN THE FOLLOWING TO YOUR PRINCIPAL	
$\ \square$ This sheet with all applicable items completed and checked	
☐ Teacher's Closing Reports printed from the NAD Dashboa	ard
PRINCIPALS ONLY:	in the item and anterest to Doobbeard
 ☐ For Junior Academies, please upload the GPA information ☐ Print Closing Reports from the NAD Dashboard Data Roll 	n in Jupiter and submit to Dashboard., up Reports. This should match the student data in your student information
system, Jupiter iO or Renweb.	······································
PRINCIPALSSEND THE FOLLOWING TO THE OFFICE OF PREFERRED):	F EDUCATION USING A TRACKING SERVICE (USPS, UPS OR FED EX
☐ June 10 Exit Reports from teachers/principal	
 ☐ Teacher's Closing Report printed from the NAD Dashboar ☐ Principal's Closing Report printed from the NAD Dashboar 	
☐ Requests for CEUs (form found on the Lake Union Educat	
☐ Michigan Right To Know Checklist	•
Copy of Asbestos Annual Letter of Notification	_
 □ Copy of spring Semi-Annual Surveillance of Asbestos form □ School Inventory and School Equipment Update 	1
Control involvery and control Equipment opacie	
Teacher Signature	Home Phone
Teacher Address	Cell Phone
City, State, Zip	
<i>37</i>	
CERTIFIED STATEMENT:	
I have checked this work and find it has been of from the Office of Education.	ompleted according to the instructions
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Principal's Signature	School Board Chair's Signature