Secretary's Initials

Christina Education Association
Association Representative Time Log

Treasurer's Initials

Name _____ Date _____

Title _____ Month/Year _____

Signature _____

DATE	ACTIVITY DESCRIPTION	CODE	HOUR(S)
		Total Hours for the month	

CODE	CATEGORY DESCRIPTION	
1	Problem Solving	
2	Grievance	
3	Representation	
4	Membership Recruitment	
5	RA/Area/Building/Liaison Mtgs (CEA, DSEA, NEA)	
6	Political Action	
7	Training	
8	Other	

Instructions: Each Association Representative shall complete and return this form to the CEA Secretary by the Representative Assembly of the next month in order to receive full stipend.