

**Teacher Time Sheet**  
**MMS**

Name \_\_\_\_\_ School \_\_\_\_\_

Grade \_\_\_\_\_ Room \_\_\_\_\_ Date \_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday	
<b>8:00</b>						<b>8:00</b>
10						10
20						20
30						30
40						40
50						50
<b>9:00</b>						<b>9:00</b>
10						10
20						20
30						30
40						40
50						50
<b>10:00</b>						<b>10:00</b>
10						10
20						20
30						30
40						40
50						50
<b>11:00</b>						<b>11:00</b>
10						10
20						20
30						30
40						40
50						50
<b>12:00</b>						<b>12:00</b>
10						10
20						20
30						30
40						40
50						50
<b>1:00</b>						<b>1:00</b>
10						10
20						20
30						30
40						40
50						50
<b>2:00</b>						<b>2:00</b>
10						10
20						20
30						30
40						40
50						50
<b>3:00</b>						<b>3:00</b>

1. Turn in two copies to the Principal. 2. Place the third copy inside the front cover of your plan book. 3. Place the fourth copy inside of your substitute folder.