Sun Beams

Teacher: **Date:**_____

Pts	Conduct	Member Name	Parent/Guardian Name	Uniform?	Time in	Time out
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		
	Yes No			Yes No		

Conduct will be reported by award or class teachers and added to this record at the end of each meeting.