**CCS UNIFIED ARTS TEACHER’S DAILY SCHEDULE**

**FOR MIDDLE AND HIGH SCHOOL**

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| --- | --- |
| **Building(s):** |  |
| **Teacher:** |  | **Subject:** |  |
| **Period** | **Time** | **Class Name** | **# of Students** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |

Email this completed form to Betty Hill at bhill1228@columbus.k12.oh.us and Ross Shirley at mshirley@columbus.k12.oh.us.