

SWAAAC Monthly Contact Hours

Please email this form to shelly.elfner@ucdenver.edu

District Name: _____

Team Coordinator(s): _____

Month: _____

Total Number of Students	
Total Number of Assessment Visits	
Assessment Hours	
Total Number of Implementation Visits	
Implementation Hours	
Report Writing Hours	
Travel Time Hours	
Staff Development Hours	

Please note any changes to your SWAAAC team or make any additional comments below: