

Professional Development Pre-Approval and Professional Summary Form

Submit prior to engaging in Professional Development Activities listed in Appendix B-2. LPDC will review for approval. The issuance of a CEU certificate does not indicate that the CEU will be approved for your LPDC plan. All in-service programs must align with the goals of your IPDP. When your IPDP course/activity is submitted for final submission, the LPDC will determine if alignment with goals was met. It is the educator's responsibility to document and maintain records of their participation in CEU activities and to provide necessary certificates/documentation requested by LPDC.

Complete this section and submit for LPDC approval <u>before</u> you complete the activity.	
Name	
Submission Date	
IPDP Goal(s) applicable to this PD	
Date(s) of Professional Development	
Location of Professional Development	
Title of Professional Development	
Estimated Number of Hours Requested	
Activity Type (<i>select one or more as appropriate</i>) <ul style="list-style-type: none"> <input type="checkbox"/> College/university course if not Higher Learning Commission (formerly North Central) Accredited <input type="checkbox"/> Ongoing series of workshop sessions <input type="checkbox"/> Conference <input type="checkbox"/> Single workshop <input type="checkbox"/> Professional learning committee <input type="checkbox"/> Self-directed study <input type="checkbox"/> Coaching/Mentoring student teachers, new teachers, or teachers in need <input type="checkbox"/> Other equivalent activity not listed above: _____ 	Describe the activity and any expectations you have for it:

Name: _____ **Signature:** _____ **Date:** _____

LPDC Use Only	
_____ Pre-Approval approved as written OR _____ Pre-Approval must be revised and resubmitted Revision Advice:	
Signature _____	Date _____

Professional Summary

This form must be submitted by each participant to the LPDC Committee to earn CEU credit after completing the activity. Fill out the this form and attach a log of hours to submit to LPDC for final approval.

Complete this section after you complete the activity.	
Describe the activity.	
Summarize what you learned during this activity. Be sure to describe: <ul style="list-style-type: none">• How your participation in this activity supports your IPDP plan and the district's continuous improvement plan.• How this new knowledge changes your teaching and your students' achievement.	
Actual Number of Hours <ul style="list-style-type: none">• Submit a log of total hours invested in this activity.	

Name: _____ Signature: _____ Date: _____

LPDC Use Only
____ Professional summary approved as written OR ____ Professional summary must be revised and resubmitted
Revision Advice:
Signature _____ Date _____