

*Lakewood
City
Schools*

Lakewood
Professional
Development Plan

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*Lakewood Professional
Development Committee*

November 2016

Responsibilities of the *Educator*

Educators who are working under a 5-year professional license are responsible for meeting the requirements for renewal of their license. Educators must work with the Lakewood Professional Development Committee (LPDC) to complete the renewal process.

The Lakewood Professional Development Committee has developed procedures for reviewing professional development. However, each educator will have the responsibility to:

- Develop and implement his/her Individual Professional Development Plan (IPDP) after receiving a new license,
- Document his/her professional development and maintain a record of such work, and
- Follow renewal procedures and timelines.

The individual educator will take responsibility for his/her own growth by creating a plan and engaging in professional development approved by the LPDC.

THE LAKEWOOD PROFESSIONAL DEVELOPMENT COMMITTEE (LPDC) CONSISTS OF TWO ADMINISTRATORS, ONE OF WHICH IS THE EXECUTIVE DIRECTOR OF HUMAN RESOURCES, AND THREE TEACHERS.

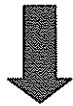
Individual Professional Development Plan *Timelines*

*As soon as new license is issued, create an
IPDP using Lakewood PD Express.*

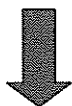
IPDP approved by LPDC



Implementation of IPDP

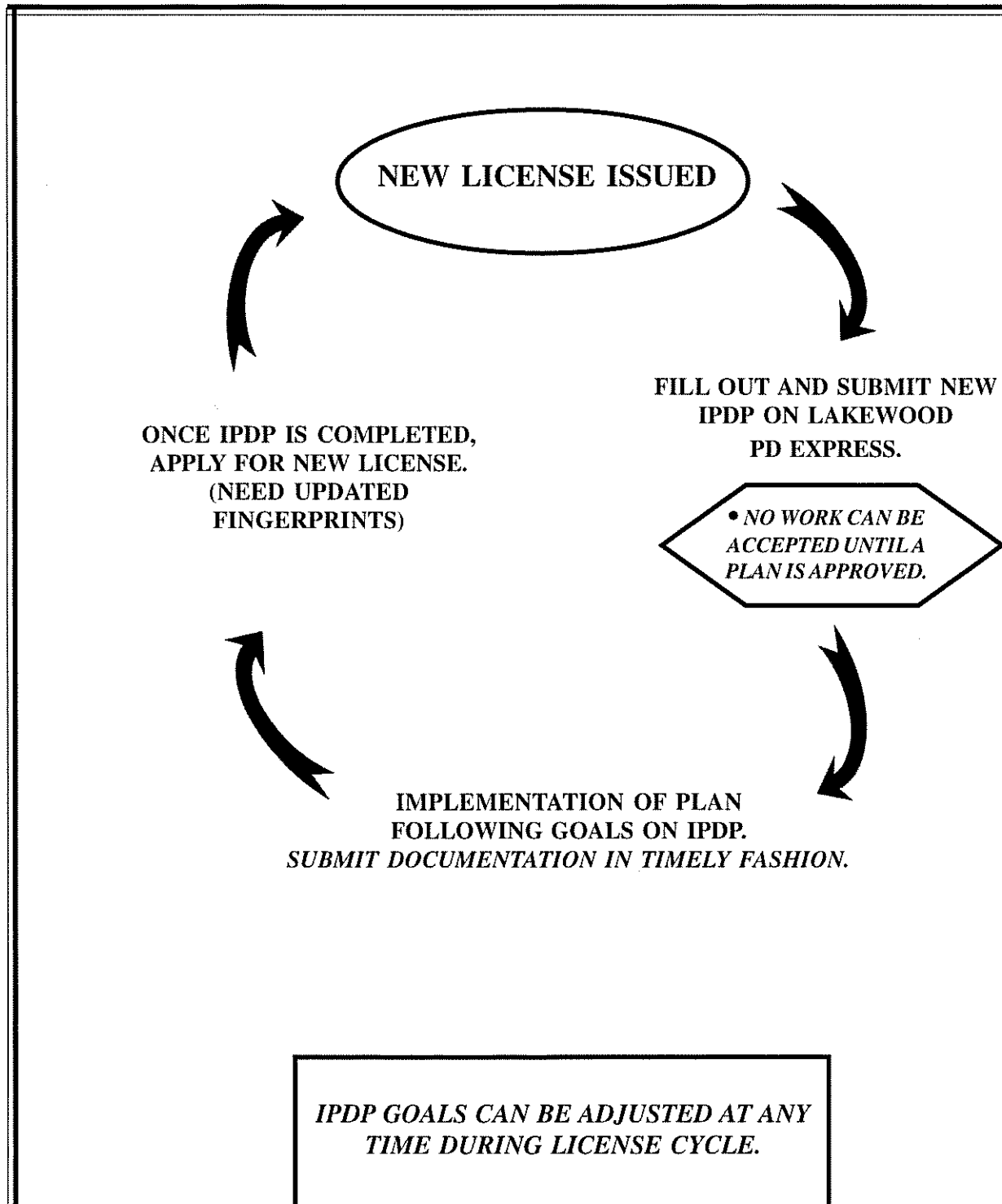


**IPDP completed, licensure
renewal submitted, and new
license received by June 30th
of the renewal year**



**New IPDP submitted after
issuance date of new license**

Individual Professional Development Plan *Timelines*



Appeal *Process*

The first step of the appeal process is through the Lakewood Professional Development Committee (Level I Appeal). The Committee will maintain an independent appeals procedure which is the second step of the appeals process (Level II Appeal). Those certificated/ licensed personnel whose plans continue to be denied may appeal to the Independent Committee per the appeals procedure (Level III Appeal). No decision of the LPDC or the LPDC appeals process (any and all steps) is grievable.

A. REASONS FOR APPEAL:

- Rejection of IPDP.
- Discrepancy with number of CEUs earned.
- Rejection of Professional Development Activity submitted.

B. PROCESS TO BE USED IN APPEAL:

Level I:

1. E-mail members of LPDC Committee with the appeal request reasons and any supporting information and/or documentation.
2. LPDC Committee will discuss appeal at the next meeting.
3. Written response from LPDC will be forwarded to staff member.
4. Accept decision (appeals process ends) or reject decision (Level II appeal begins) via e-mail.

Appeal *Process*

Level II:

1. Request Level II Appeal Hearing with LPDC Committee.
2. Written notification is sent to staff member with hearing date and time.
3. Committee hears appeal and renders decision.
4. If Committee accepts plan, process ends. If Committee rejects plan, Level III appeal process must be initiated within 2 weeks of Level II rejection.

Level III:

1. Staff member appeals to Independent Committee.
2. Independent Appeals Committee renders final decision.

APPENDIX MM
SALARY ADJUSTMENT FOR ACADEMIC GROWTH AND LOCAL PROFESSIONAL DEVELOPMENT COMMITTEE (LPDC) CREDIT FORM
 (Submit one form per activity)

Name: _____ Date: _____
 Last First MI
 Building(s): _____ Teaching Assignment(s): _____

LPDC/IPDP (Applies to certification/licensure)
REFERENCE LPDC NOTEBOOK FOR PROCESSING GUIDELINES

Preapproval _____ Evaluation* (*Documentation Needed as Proof of Completion for LPDC Credit.) _____

Option: (Please check one)

- | | |
|---|--|
| <input type="checkbox"/> Course/Seminar for University Credit | <input type="checkbox"/> Teaching a College Course/Seminar |
| <input type="checkbox"/> Teaching Adult Vocational/Technical Course | <input type="checkbox"/> Professional Presentation |
| <input type="checkbox"/> Professional Education Organization Activities | <input type="checkbox"/> Completion of Requirements for National Board Certification |
| <input type="checkbox"/> Peer Observation/Peer Coaching | <input type="checkbox"/> Supervisor of Student Teacher |
| <input type="checkbox"/> Mentor of Entry Year Teacher | <input type="checkbox"/> Curriculum Development |
| <input type="checkbox"/> District-Wide Initiatives Committee Work | <input type="checkbox"/> School-Related Project |
| <input type="checkbox"/> Professional Development | <input type="checkbox"/> Professional Conference/Workshop/Institute |
| <input type="checkbox"/> Publication of Original Work | <input type="checkbox"/> Grant Writing |
| <input type="checkbox"/> Self-Directed Educational Development | <input type="checkbox"/> Externship |
| <input type="checkbox"/> Community/Business Educational Activity | <input type="checkbox"/> Other _____ |

Beginning and Ending Dates of Activity _____

Title of Activity _____ Course # _____
 Amount of Credits/CEUs given _____ Amount of Credits/CEUs given _____
 (1 CEU = 10 Contact Hours; 1 Semester Hour = 3 CEUs, 1 Quarter Hour = 2 CEUs)

How does this activity support your IPDP Goals?

Employee's Signature _____ Date _____
 LPDC's Signature _____ LPDC CEU Status: _____ Date _____

SALARY ADJUSTMENT FOR ACADEMIC GROWTH (Applies to salary increase)
REFERENCE LTA AGREEMENT, Section 6.02Q, FOR PROCESSING GUIDELINES

Preapproval (Does this activity require preapproval? Reference Appendix LL)
 Evaluation* (*Documentation Needed as Proof of Completion for Salary Adjustment for Academic Growth Credit.)

Option: (Please check one)

- | | |
|--|--|
| <input type="checkbox"/> Course/Seminar for University Credit | <input type="checkbox"/> Supervisor of Student Teacher |
| <input type="checkbox"/> Completion of Requirements for National Board Certification | <input type="checkbox"/> Other _____ |

Beginning and Ending Dates of Activity _____

Title of Activity _____ Course # _____
 Credits given by _____ Amount of Credits (Semester Hours) given _____

How does this activity support your Salary Adjustment for Academic Growth?

Did you or will you apply for any subsidy or reimbursement from the District? (If answered "yes," will generally disqualify applicant for salary adjustment.)
 **Will a sub be required?

Employee's Signature _____ Date _____
 Principal's Signature _____ Date _____
 Salary Adjustment for Academic Growth Signature _____ Date _____

Salary Adjustment for Academic Growth Meeting Date _____ New Salary Adjustment for Academic Growth Status _____
 Salary Adjustment for Academic Growth – White and Yellow Copies _____ LPDC = Pink and Goldenrod Copies _____

