



Office of the Registrar

MISERICORDIA UNIVERSITY

Act 48 REPORTING FORM
GRADUATE EDUCATION
PROFESSIONAL DEVELOPMENT CENTER

Please print or type

Name Last First Middle

Semester Year

Professional Personnel ID (PPID) Number-- REQUIRED

Course Number Section Start Date End Date Credits*

Act 48 Reporting Authorization

Federal law requires us to tell you how we collect, use, share, and protect your personal information. Federal law also limits how we can use your personal information. Protecting the privacy and security of students' personal information is very important to us. Please read this notice carefully to understand what we do with the personal information we collect both online and offline.

This information is required to effectively collect and accurately report your ACT 48 credits to the Pennsylvania Department of Education (PDE). Consistent with the Federal Privacy Policy and with Misericordia University's privacy policy, the collected information will be used for PDE reporting purposes only and not shared with any other third party company or person. For a complete University Privacy Policy, please refer to the University catalog or our website at www.misericordia.edu.

By signing above, you have understood our privacy policy and request to have your credits reported to PDE.

Signature

Date

Please return to Betty Ann Duffy (eduffy@misericordia.edu)

Office Use Only

Student PDE Number

CACE Verification Signature

Date Course(s) reported to PDE

Submitted by