

Bellevue City Schools Local Professional Development Committee Individual Professional Development Plan (IPDP)

*** Submit Immediately Following Receipt of New License ***

Please type form.

Section I.

Original Copy
BOE Copy

Date

Last Name

First Name

Home Address

City

State

Zip Code

Home Phone

School

Assignment

Select One

Substitute
Teacher

New Proposal

Revised Proposal from previously accepted proposal

Section II.

List All Licenses

License Number

Type / Area

License Grade

Initial Date

Expiration

License Number

Type / Area

License Grade

Initial Date

Expiration

License Number

Type / Area

License Grade

Initial Date

Expiration

License Number

Type / Area

License Grade

Initial Date

Expiration

License Number

Type / Area

License Grade

Initial Date

Expiration

Section III.

Briefly Describe Your Plan.

Explain how your plan is relevant to subject area content, instructional practices, and / or student learning.

Explain how your plan aligns with building / district goals.

Explain your proposed criteria for assessing the success of your plan as it pertains to student achievement.

Section IV.

Must be completed if doing Group 4 Independent Activities / Projects.

Outline your proposed project and procedures.

Provide a plan for documentation.

Number of B.E.A.M.S. requested.

Provide rationale for the request.

Section V.

Read each Option description and select the one that applies.

Option 1: 18 B.E.A.M.S. (Groups 1, 3 and 4)

Requirements:

- A. B.E.A.M.S. activities must meet the BCS LPDC Group Activity Guidelines
- B. B.E.A.M.S. activities must have been endorsed by the LPDC.
- C. Individuals designing "other activities" (Group 4) must prepare proposal outlining the planned activities and the number of B.E.A.M.S. requested.

Option 2: 9 Quarter / 6 Semester Hours (Group 2)

Requirements:

- A. Course work for quarter / semester hours must meet the BCS LPDC Group Activity Guidelines. (page B9)
- B. Course work must be taken through an NCATE or ODE accredited college or university.

Option 3: Combination of the First 2 Ways

Requirements:

- A. Requirements and verifications for type of activity included in a combination proposal must follow the previous descriptions.
- B. The parts of the project must total the equivalent of 18 B.E.A.M.S.. The ratio 3 B.E.A.M.S. = 1 semester hour, will apply.

Select one option.

Option 1: 18 B.E.A.M.S. (Group 1, 3 and / or 4)

Option 2: 9 Quarter / 6 Semester Hours (Group 2)

Option 3: Combination of the First 2 Ways

Section VI.

Return for Revision

Notes

LPDC Signature _____

Date

Accepted

Notes

LPDC Signature _____

Date