

CLPDC: Pre-Approval Form for Professional Development

Please check **all** that apply: College Credit Course _____ Salary(Column) Advancement _____
Tuition Reimbursement _____ Renewal _____ Stipend Request _____ Workshop _____
Collaborative Project _____
Contact hours / Semester hours requested: _____

Name (please print): _____ Building: _____

Title of the course: _____

Is this course a requirement for your current college program? Y N

Course is provided by: _____

Describe the online course or attach syllabus.

How will you use this in your current position? Describe the anticipated benefits to yourself, students, building, and/or district as a result of this course.

Anticipated completion date of the course: _____

Signature: _____ Date Submitted: _____

FOR LPDC USE ONLY Approved: _____ Denied: _____ LPDC Initials: _____ Date: _____

CLPDC Bylaws state: "Credit course work/activity is not guaranteed before final review/approval of LPDC."
CLPDC reserves the right to require additional information upon submission of all professional development.

Canfield Local Schools, Local Professional Development Committee

Modified 11/18