

Workshop/Conference Pre-Approval

Westlake City School District LPDC

Name: _____

Date: _____

Building: _____

Position: _____

For a Workshop: If you are seeking local district LPDC approval for CEU credit, carefully complete this section. The workshop **Certificate of Completion** should be supplied to the LPDC for final award of CEU credit. **All requests for pre-approval should be submitted at least SIX weeks prior to the workshop. Failure to do so may result in the denial of approval.**

I. Workshop Provider:

II. Title of Workshop:

III. Workshop Objectives:

IV. Workshop Dates/Location:

V. Identify the IPDP goal met by the activity: :

VI. Specify how this experience supports your IPDP:

VII. Number of PDUs/CEUs requested:

****You are reminded that CEU credits used to renew a license must assist you in accomplishing the goals of your Individual Professional Development Plan. The workshop must correlate with the district or building goals which address the needs of students, the district, and educator development.**

LPDC USE ONLY:

LPDC Chairperson: _____

Date: _____

**Signature verifies that the LPDC has pre-approved this workshop.*