

# Paraprofessional Checklist for Submitting Hours for Recertification

## DO NOT SUBMIT HOURS UNTIL ALL SIX HOURS HAVE BEEN OBTAINED

Date: \_\_\_\_\_

Name: \_\_\_\_\_

School: \_\_\_\_\_

**Please complete the following and submit to Gyla Davis at Special Services:**

- \_\_\_\_\_ 1. Make a copy of everything to keep in your own records.
- \_\_\_\_\_ 2. Complete the lower portion of this form.
- \_\_\_\_\_ 3. Attach a copy of your Thrive transcript.
- \_\_\_\_\_ 4. Attach any necessary Alternative Personnel Development Hours forms for out of district classes.
- \_\_\_\_\_ 5. Attach a copy of your current CPR/First Aid Card. **CPR Expiration Date:** \_\_\_\_\_  
 (REQUIRED FOR EVERYONE. Note that no Online CPR training will be accepted - CPR/First Aid training must be attended in-person.)  
**\*\*Please be diligent and do not allow your CPR/First Aid to expire.\*\***
- \_\_\_\_\_ 6. REQUIRED FOR EVERYONE: (should be on your Thrive transcript)
  - Online Blood Borne Pathogen Training Receipt.
  - Online Bullying Prevention Receipt.
  - Online Section 504/Title II/ Diabetes Training Receipt.
  - Online Safety Policies and Procedures Receipt.
  - FERPA (if not on transcript, include signed copy from dept. head/principal)

**Paraprofessionals must obtain six hours of professional development during the current school year July 1 to June 30.** At least one hour must come from each of the following categories:

- SPECIAL EDUCATION
- CLASSROOM MANAGEMENT
- CHILD ABUSE/NEGLECT

The other 3 hours may come from any of these categories or any other general category. **\*\*NEW Paraprofessionals send in a copy of your certificate and that will count as your 6 hours for that school year. \*\*** No videos will be accepted as professional development points. Blood Borne Pathogens, Section 504 Diabetes, Bullying Prevention, Safety Policies and Procedures, FERPA and First Aid/CPR are **not** accepted as Professional Development Hours, but are required for every employee at MPS.

**List the Titles and Dates of the In-services Attended & the Number of Hours Awarded.**

**Remember each Out of District In-Service should have a completed Alternative Form attached.**

Title of In-service	Date	# Hours	Spec. Ed. Hours	*Non-Spec. Ed. Hours