

**PARMA CITY SCHOOL DISTRICT  
INDIVIDUAL PROFESSIONAL DEVELOPMENT PLAN (IPDP)**

Date \_\_\_\_\_

Name \_\_\_\_\_ Building(s) \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Current Teaching/Admin. Position \_\_\_\_\_ Number of yrs. in current position \_\_\_\_\_

Total years in district \_\_\_\_\_ Other district(s) \_\_\_\_\_

Area of certification/licensure which you are renewing/convertng: \_\_\_\_\_

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I am submitting my plan to do one of the following:

Check one: \_\_\_\_\_: Convert to License \_\_\_\_\_: License Renewal

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**A. CONVERT TO LICENSE: Area of certification which you are converting:**

Type \_\_\_\_\_ Issue Date \_\_\_\_\_

\_\_\_\_\_ 8 Year Expiration Date \_\_\_\_\_

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**B. LICENSE RENEWAL :**

\_\_\_\_\_ For a first 5 year Professional License Renewal (must have 6 semester hours or 180 PDU's or combination of the above)

Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

\_\_\_\_\_ For a second 5 year Professional License Renewal (must have master's degree or 30 semester hours of graduate credit if 2-year license was issued after 7/1/2002)

Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

\_\_\_\_\_ Subsequent 5 year Professional License Renewals (must have 6 semester hours or 180 PDU's or combination of the above)

Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

<b>INDIVIDUAL PROFESSIONAL DEVELOPMENT PLAN (IPDP)</b>
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ORIGINAL \_\_\_\_\_ REVISION \_\_\_\_\_

LIST THREE PROFESSIONAL DEVELOPMENT GOALS FROM THE RESOURCES ON FORM 2

GOAL 1: \_\_\_\_\_

GOAL 2: \_\_\_\_\_

GOAL 3: \_\_\_\_\_

**PLAN APPROVAL**

**IPDP Use**

APPROVED \_\_\_\_\_

NOT APPROVED \_\_\_\_\_

IPDP CHAIRPERSON \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**LPDC Use**

APPROVED \_\_\_\_\_

NOT APPROVED \_\_\_\_\_

LPDC CHAIRPERSON \_\_\_\_\_ DATE \_\_\_\_\_

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COMMENTS: \_\_\_\_\_  
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**PLEASE SUBMIT A REVISED IPDP TO THE LPDC IF YOUR GOALS CHANGE**

**INDIVIDUAL PROFESSIONAL DEVELOPMENT PLAN  
COMPLETION OF LICENSURE REQUIREMENTS**

**IPDP Use**

APPROVED \_\_\_\_\_

NOT APPROVED \_\_\_\_\_ (see notes)

IPDP CHAIRPERSON \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**LPDC Use**

APPROVED \_\_\_\_\_

NOT APPROVED \_\_\_\_\_ (See notes)

LPDC CHAIRPERSON \_\_\_\_\_ DATE \_\_\_\_\_

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Notes: \_\_\_\_\_  
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