

UPPER MERION AREA SCHOOL DISTRICT

2008-09 PROFESSIONAL DEVELOPMENT/FLEX DAY FORM ACT 48 REQUEST FORM

Name _____ School _____ Grade / Subject _____

Activity Title _____ Activity Date(s) _____

Total number of hours expected for flexible staff development exchange: (6) (12)	Please circle exchange date(s): <div style="display: flex; justify-content: space-around;"> 1/2/09 4/13/09 * </div> <small>(must receive by Dec. 1st) (must receive by February 15th)</small> *aides' only available day for flex
Total number of hours expected for Act 48 Credit _____	

Description _____

Activities Needing Pre-Approval of Principal: The activities listed below need the building principal's authorization prior to participation: **Note: Pre-approval deadline must be prior to December 1, 2008.**

- _____ Enhances educator's content knowledge in area of certification.

_____ Enhances educator's ability to analyze and use data in an instructional setting.

_____ Other, specify in description above.

_____ Increases educator's teaching skills.

_____ Enables educator to work effectively with parents and community partners.

_____ Check here if you are a LTS or Substitute.

Principal's Signature

Date

Activities Needing Pre-Approval of Principal and Assistant Superintendent: All activities listed below need prior approval by the building principal and Assistant Superintendent.

- _____ Out-of-District Seminar/Workshop (attach description)

_____ Curriculum Development

_____ In-District Professional Development Presentation

_____ Planned Instructional Writing

_____ Workshop Presenter

Principal's Signature

Date

Assistant Superintendent's Signature

Date

Note: Please add this to your year-to-date activity log, retain a copy for your file and send the completed form to: Director of Curriculum and Staff Development, UMAMS, 450 Keebler Road, King of Prussia, PA 19406.

Attendance Verification Section: Please have this section signed by the workshop presenter or an appropriate supervisor to verify your attendance or completion of the activity.

I verify that this applicant has completed the activity described above and should be credited with the staff development hours as listed.

Verifying Signature

Date

Teacher's Signature

Note: Please send the completed Attendance Verification Section of this form to: Director of Curriculum and Staff Development, UMAMS, 450 Keebler Road, King of Prussia, PA 19406.