

Midwestern Intermediate Unit IV
Act 48 Participant Data Entry Form

First Name: _____ Last Name: _____

Professional Personnel Identification (PPID): _____

Street Address: _____

City, State, & Zip Code: _____

Phone Number: _____ Email: _____

Current Position Title: _____

Employer: _____

Street Address: _____

City, State, & Zip Code: _____

Course/Activity Name: _____

Name of Instructor/Presenter: _____

PERMS Course Number (if applicable): _____

Date of Course/Activity: Start Date: _____ End Date: _____

Act 48 Hours Attended/Awarded: _____ CPE Credits Awarded: _____

Act 48 requires that collegiate courses, continuing professional education courses (offered by Intermediate Units), and noncredit continuing professional education programs, activities or learning experiences be "related to an area of the professional educator's assignment or certification" as per 24 PS 12-1205.2(c). PDE interprets this language to mean:

- *Courses or noncredit activities in the content area of the educator's certification.*
- *Courses or noncredit activities in instructional methods, pedagogy, strategies/tools for the classroom, classroom management, assessment, or evaluation.*
- *Courses or noncredit activities in reading, writing, speaking, and listening.*
- *Courses or noncredit activities in mathematics, mathematical reasoning, and the sciences.*
- *Courses or noncredit activities that address inclusive classroom environments.*
- *Courses or noncredit activities in technology.*
- *Courses or noncredit activities in the areas of student health, interpersonal skills in a school environment, safe and supportive schools, and resiliency.*

I certify that the information provided by me is current, complete, and accurate to the best of my knowledge, and that the hours or credits being requested are eligible in accordance with 24 PS 12-1205.2(c).

Participant Signature

Date

I certify that the information provided by this participant is current, complete, and accurate to the best of my knowledge, and that the hours or credits being requested are eligible in accordance with 24 PS 12-1205.2(c).

Supervisor/Employer Signature

Date

