



I _____ - _____

Entered _____ Completed _____

Individual Initiative Professional Development Request

Name:

Building:

Date Submitted:

This form should be used to request hours from an outside activity be counted toward the annual contractual requirement for professional learning. Please fill out completely and submit it to your building principal/supervisor **prior to registering** for outside activity.

In order to count this activity toward your contractual requirement, it must:

- Take place outside your regular workday;
- The professional learning should be directly aligned with the staff member's curriculum or with pedagogical practices that will benefit student outcomes;
- Work must be completed by May 31st; and
- Certificate of completion must be submitted to Cynthia_Craig by May 31st.

Official Name of course/outside activity:

Name of Organization Offering course/activity:

Location:

Date(s):

Time(s):

Total number of PD hours requested:

(Number of hours CANNOT exceed 12 hours per year for full-time staff)

Brief description – please provide and/or attach documentation:

Rationale for attending:

(BELOW TO BE COMPLETED BY BUILDING PRINCIPAL/SUPERVISOR)

Approval Decision: Approved ☐ Denied ☐

Principal's Signature:

Date:

Approval should be sent to cynthia_craig at the Teacher Center electronically or in the mail