Ohio | Department of Education

Approval Verification Form for Educators Leaving an Ohio Local Professional Development Committee (LPDC)

The following educator had an approved Individual Professional Development Plan (IPDP):

Name of Educator (print)	Educator State ID	Birthdate
		[redacted]

I verify the educator has completed the following from _____ (Date) to _____ (Date).

_____ college/university **semester** hours

_____ college/university **quarter** hours

_____ LPDC approved professional development activities (CEUs)

_____ LPDC approved contact hours

☐ Yes ☐ No The applicant meets the State Board of Education's definition of consistently high-performing teacher.

_____ LPDC Coordinator/Designee Signature

_____ Date

Please print:

Name of Authorized Signer Trina Griesdorn

Name of School/District Greenville City Schools

LPDC IRN 009004

Name of LPDC Greenville City Schools LPDC

LPDC Chairperson Trina Griesdorn

Chairperson phone number _____

Chairperson email address Tgriesdorn@gcswave.com

Please **UPLOAD** this completed form through your SAFE account. Go to ODE.CORE > My Educator Profile > My Documents to upload this form.

Please be sure all required information is correct and included on the form. An incomplete form and/or incorrectly completed form will not be accepted, and a new form will be required.