UNIFIED SCHOOL DISTRICT #273 Professional Development Plan Worksheet

Licensed Staff and Classified Staff Form

		Licens	ca otali ana ota	oomou otan i c	,,,,,,		
			School Year: 2				
		All points earned require PRE-API	PROVAL (with the exc	eption of district ins	services and commi	ittee work)	
Employee's Name:				Employee's	s Signature:		
Building/School:							
Assignment:							
Certificate Effective	Date:			Certificate Ex	piration Date:		
Highest Degree Ear	ned:						
Date: Administrator's Sign Date: PDC Chairperson's							
College hours earn		5 school vear:					
Course Name: Course Completion		o sonoci yeur.		Course Name			
No. Hour/s: College:		No. Points:	0	No. Hour/s: College:		No. Points:	0
oogo.		MUST BE SUBMITTED T	ENTATION (grad O THE BOE OF edit towards sa	le card, trans FICE by the e	nd of the scho	ool year	
Goals:							
1							
2							
3							
4							
5							
	В	Unified School District #273 eloit Special Education Coopera	ative			Total Points Page 2 Total Points Page 3 Total Points Page 4 Total Points Page 5 College Hours	0 0 0 0
	Grand To	otal Points - Relicensure	0	I	Grand Total	College Points Points - Salary Movement	0

KNOWLEDGE LEV	/EL - Salar	y Moveme	nt and/or R	elicensure		
Activities Level 1: Knowledge	Addresses Goal #	C, PE, SP	Date	Hours	Implement Points	Points
A.						0
Verification:						
B.						0
Verification:						
C.						0
Verification:						
D.						0
Verification:			-		-	-
E.						0
Verification:						
F.						0
Verification:			<u> </u>		•	
G.						0
Verification:			•		•	
H.						0
Verification:						
I.						0
Verification:			-		-	
J.						0
Verification:			_	_	_	_
K.						0
Verification:						
L.						0
Verification:						
M.						0
Verification:						
N.						0
Verification:						
0.						0
Verification:						
Total F	Points Page 2					0

APPLICATION LEVELS 2 8	3 - Relicensure for Lice	nsed Staff or Sta	te Required hours for Paras	Only	
Activities Level 2: Application (Must Include proof of application)	Addresses Goal #	C, PE, SP	Date/s	Points	
Α.				0	
Verification:					
Related Knowledge Activity:		Date:	Points Awarded:		
В.				0	
Verification:					
Related Knowledge Activity:		Date:	Points Awarded:		
C.				0	
Verification:					
Related Knowledge Activity:		Date:	Points Awarded:		
D.				0	
Verification:					
Related Knowledge Activity:		Date:	Points Awarded:		
Activities Level 3: Impact (Must include proof of impact)	Addresses Goal #	C, PE, SP	Date/s	Points	
A.				0	
Verification:					
Related Application Activity:		Date:	Points Awarded:	0	
Related Knowledge Activity:		Date:	Points Awarded:		
В.				0	
Verification:					
Related Application Activity:		Date:	Points Awarded:	0	
Related Knowledge Activity:		Date:	Points Awarded:		
•	Total Points Page	3			

Co	ommittee Log Sheet (doc		ovement and/or Relice at the year) - 100 points		r period	
lame of Committee	Date/s	hours & mins to the nearset 10th of an hour	Name of Committee	Date	/s	hours & mins to the nearset 10th of an hour
	otal above points and tra	insfer below. Failur	e to total above points	by committee	below	
		WILL RESULT IN A I		,		
ndividual Committee To	otals (totaled from above)					
Committee Name				Hou	rs	Points
						0
						0
						0
						0
						0
			NTATIONS AT LOC, ST, re, 75 points max in 5-		EL:	
. Location:	outary movemen	it una or removing	io, repointe max in e ;	your poriou		pts. earned: 0
opic:				Pre-Approve	d:	pto: carriou.c
Outline of Presentation	(attach)			i ie-Appiove	u.	
Date of Presentation:	(uttuon)					
	Convert min to 10ths lik	a above:		Preparation	Time	1 ,
_	Convert min to 10ths lik	e abuve:		rieparation	inne:	1 '
udience:						
. Location:				In		pts. earned: 0
opic:				Pre-Approve	d:	
Outline of Presentation	(attach)					
ate of Presentation:						
ength of Presentation:	Convert min to 10ths lik	e above:		Preparation	Time:	(
Audience:						
	Linemand Staff On the		Indonesidant Cont.			
UDEDENDENT STUDY		Preapproval	Independent Study Description	Date	Hours	Points
	neriod		Description	Date	Hours	i onto
NDEPENDENT STUDY 5 points/max in 5-year	period					
	period					
	period					
	period					
	period Total Points Page 4					

KNOWLEDGE LEVEL o	continued -	Salary Mo	vement and	d/or Relice	nsure	
Activities Level 1: Knowledge	Addresses Goal #	C, PE, SP	Date	Hours	Implement Points	Points
P.						0
Verification:						
Q.						0
Verification:						
R.						0
Verification:						
S.						0
Verification:	_		_		_	
т.						0
Verification:						
U.						0
Verification:	•		<u> </u>		•	
V.						0
Verification:	•		<u> </u>		•	
W.						0
Verification:			•		•	
X.						0
Verification:						
Y.						0
Verification:			•		•	
Z.						0
Verification:						
AA.						0
Verification:						
BB.						0
Verification:						
CC.						0
Verification:	-		-	_	-	_
DD.						0
Verification:					-	
Total I	Points Page 5					0

College hour	rs earned 2024-202	5 school year:						
Course Name	e:			Course Name	e:			
Course Completion Date:			Course Comp	pletion Date:				
No. Hour/s:		No. Points:	0	No. Hour/s:			No. Points:	0
College:				College:				
Course Name	9 :			Course Name	e:			
Course Comp	oletion Date:			Course Comp	pletion Date:			
No. Hour/s:		No. Points:	0	No. Hour/s:			No. Points:	0
College:				College:				
Course Name	ə:			Course Name	e:			
Course Comp	oletion Date:			Course Com	Course Completion Date:			
No. Hour/s:		No. Points:	0	No. Hour/s:			No. Points:	0
College:				College:				
Course Name	e:			Course Name	e:			
Course Comp	oletion Date:			Course Completion Date:				
No. Hour/s:		No. Points:	0	No. Hour/s:			No. Points:	0
College:				College:				
Course Name	e:			Course Name	e:			
Course Comp	oletion Date:			Course Completion Date:				
No. Hour/s:		No. Points:	0	No. Hour/s:			No. Points:	0
College:				College:				
						College Hours	,	0
						College Points	8	0