

MEVS – Local Professional and Development Committee
Other Request for Contact Hour Activity

Educator's Name: _____ Building _____

STEP 1 – Prior to Completing Other Activity

OTHER ACTIVITY (PRE-APPROVAL)

Describe the proposed activity – Please check the *Professional Development Activities* for suggestions. These activities must be pre-approved by the LPDC on this form.

Name/Title of Administrator who will confirm activity and contact hours

Name

Title

PRE-APPROVAL SIGNATURE _____ Date _____

(LPDC Chairperson) *Signature verifies that LPDC has pre-approved this activity but not the contact hours request – this to be approved later after activity has been completed with documentation and signature of supervisor.*

STEP 2 – After completion of Other Activity

OTHER ACTIVITY CONTACT HOURS APPROVAL
(this should be submitted as your contact hour documentation)

1. Identify the number of clock hours of involved in other activity _____
2. How many CONTACT HOURS are you requesting _____
(How many hours of professional development learning in the process; also be sure to verify with # allowed in the Professional Development Activity Overview)
3. Attach any additional information that you think might help your LPDC to review YOUR contact hour credit for this other activity
4. Gain signature/date of administrator (from above pre-approval) for confirmation of completion of activity and contact hours

(Signature Administrator)

(Date)
