

## BCESC Individual Professional Development Plan

Name \_\_\_\_\_ New IPDP \_\_\_\_\_ Amended IPDP \_\_\_\_\_

Current License(s) \_\_\_\_\_ Expiration Date \_\_\_\_\_

Current Assignment(s) \_\_\_\_\_ Building \_\_\_\_\_

List the goals to be addressed during this renewal cycle. (Minimum of three) These must be in direct relationship with your district goals as they pertain to your current work assignment. If pursuing a graduate degree, your goal may just reflect that intention. Please submit original and 5 copies of this form to the LPDC chair.

Related Agency Goal	Professional Development Goal (What do you expect to learn?)	How to Acquire (See Options, page 20)
_____		
_____		
_____		

I certify that the information provided in this Individual Professional Development Plan is true and accurate to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

To be completed by the BCESC LPDC

\_\_\_\_\_ This Individual Professional Development Plan has been approved as submitted.

\_\_\_\_\_ This Individual Professional Development Plan has merit, but has not been approved as submitted. Please note the highlighted sections and comments and then consult the BCESC Procedures and Guidelines Plan.

Signature of the LPDC Chair \_\_\_\_\_ Date \_\_\_\_\_

## Butler County Educational Unit Tracking Form

To facilitate the renewal process, this form should be used to maintain a log of hours of professional development activities for which you do not receive certificates of attendance. This can include committee work, research projects, serving as a cooperating teacher, mentoring, etc. Should you have any questions, see your LPDC representative.

Description of Activity (must be directly related to your IPDP)	Date	Hours	IPDP Goal Number	Authorized Signature (chair or supervisor)





**LPDC VERIFICATION FORM**  
**For**  
**8-YEAR PROFESSIONAL CERTIFICATE RENEWAL**

