

# OTTAWA-GLANDORF SCHOOLS

## PROFESSIONAL DEVELOPMENT ACTIVITY PROPOSAL

Complete and submit this form to the LPDC  
to request prior approval for CEUs.

EMPLOYEE REQUEST

Today's Date \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Hours needed to complete activity \_\_\_\_\_

Expected Completion Date \_\_\_\_\_

Total CEUs Requested for this Program \_\_\_\_\_ CEU Option \_\_\_\_\_

Write a brief description of the proposed activity. \_\_\_\_\_

\_\_\_\_\_

Briefly describe how this activity will enhance your skills and help you grow professionally. \_\_\_\_\_

\_\_\_\_\_

Describe how this proposed activity relates to district, building, and/or personal goals. \_\_\_\_\_

\_\_\_\_\_

If the benefits of this activity can be shared with other community or staff members, describe how and with whom you will share it.

\_\_\_\_\_

APPROVAL

### PRELIMINARY APPROVAL OF LPDC GRANTED:

\_\_\_\_\_ Date \_\_\_\_\_

*Signature*  
*Member, O-G Local Professional Development Committee*

*Completed Professional Development Activity Voucher required for final approval.*