

Greenburgh Eleven UFSD

P.O. Box 501

Dobbs Ferry, NY 10522

Professional Development District Form

Directions: This form is provided for use by individuals holding either an Initial or a Professional certificate. It is to be used as a planning tool for completing professional development activities in accordance with certification requirements.

- 1. Record planned activities in the table below.
2. Keep registration forms, and any other documentation with this record. Documentation must be retained for seven years.
3. DO NOT submit this form to the Office of Teaching Initiatives. On-line reporting will become available soon through the Office of Teaching Initiatives Web site, which will allow the school district to report electronically the number of clock hours completed by the certificate holder.
4. Upon completion of professional development activities for the year, the certificate holder should verify the number of clock hours actually reported by the district on his/her behalf.

Name of Certificate Holder:
Certificate Title: Certificate Number
Employment Period:
July 1, 20__ through June 30, 20__
Table with 5 columns: Activity, Provider, Date(s), District Goal Addressed, Clock Hour Equivalent (Estimated)

Signature of certificate holder Date

Signature of district representative Date

DO NOT SUBMIT THIS FORM. PLEASE KEEP ONE COPY FOR YOUR OWN RECORDS AND SUBMIT ANOTHER COPY TO THE HUMAN RESOURCES OFFICE BY JUNE 30TH.