



**How will the plan help you to enhance student learning?**

**What resources will you use to complete your plan?**

\_\_\_\_\_  
Supervisor/Advisor Signature\*      Date

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

*\*This verifies that I have reviewed the proposal  
and am aware of the activities required.*

**REVISIONS TO PROFESSIONAL DEVELOPMENT PLAN**

<p><b>How are you revising your plan?</b></p>          <p>_____ Date      Supervisor/Advisor</p>	<p><b>How are you revising your plan?</b></p>          <p>_____ Date      Supervisor/Advisor</p>
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## COMPLETION OF PROFESSIONAL DEVELOPMENT PLAN

List Professional Development Activity	Domain(s)	Number of PDUs

**Domains:**

- 1 = Subject matter or specialty.
- 2 = Assessment strategies.
- 3 = Methods and curriculum.
- 4 = Understanding diversity.
- 5 = State and national educational priorities
- 6 = Use of technology in education.

**Note:**

- One clock hour = one PDU
- One quarter hour = 20 PDUs
- One semester hour = 30 PDUs
- Minimum of PDUs:
- 75 for Basic License.
- 125 for Standard or Continuing License.

## COMPLETION OF PROFESSIONAL DEVELOPMENT PLAN

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## REFLECTION ON PROFESSIONAL DEVELOPMENT PLAN

Comment briefly on your CPD activities and the effect that you observed on student learning and any adjustments you made or will make to enhance student learning. (Attach additional pages as needed.)

\_\_\_\_\_  
Supervisor/Advisor Signature\*      Date

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

\*I have reviewed the results of the CPD plan and verify completion of the plan.

**The completed form is retained by the district.**