CLARENCEVILLE SCHOOL DISTRICT

RECORD OF 30 HOURS OF DISTRICT PROVIDED PROFESSIONAL DEVELOPMENT REQUIREMENTS FOR ALL TEACHERS

The State of Michigan requires that all school districts provide **five days** of professional development during each school year. (**These days are in addition to the fifteen days required of beginning teachers during their first three years of teaching.**) For purposes of record keeping, a day is defined as six hours. A day can be earned all at one time (no more than 8 hours in one day) or hours can be accumulated to equal 30. Thirty (30) is the total number of required hours.

Instructions: Please complete this form with the date of learning, topic learned, number of hours and, category, each individual professional development activity listed. Reference the **category codes and acceptable activities** list below. The list aligns with the Michigan Department of Education (MOECS) website. **The completed form must be completed, printed out, and submitted to your school office by the LAST WEEK OF MAY each year**.

Current School Year _____ Today's Date _____

Teacher's Name _____ Building _____

CATEGORY CODES/ACCEPTABLE ACTIVITIES

1. Adjusting instruction for students with special needs
2. Adjusting instruction for English Language Learners (ELL)
3. Adjusting instruction for young children with developmental delays
4. Assessment strategies
5. Blended/online learning
6. Content specific to grade level
7. Cooperative Learning
8. Cross-curriculum integration
9. Cultural Awareness
10. Curriculum revision and alignment across grades
11. Differentiated instruction
12. Engaging and motivating students
13. Incorporating technology into instruction
14. Pedagogy specific to content
15. Preparing to be a mentor
16. Preparing to teach advanced placement or dual enrollment courses
17. Reading in the content area
18. Response to Intervention (RTI)
19. Responding to inappropriate student behavior
20. School Improvement planning
21. Using data to adjust instruction
22. Writing across the curriculum

Date of Learning	Topic Learned	# Hours	Category #

TOTAL HOURS (not to exceed 30)_____

I have reviewed the above district provided professional development record and agree to its content. I agree that documentation exists to verify teacher attendance at each DPPD.

☐ Teacher Signature _____

☐ Principal Signature _____

Date _____