

**Steubenville City Schools  
Local Professional Development Committee  
Individual Professional Development Plan  
UPDATE**

Please complete the following:

Name \_\_\_\_\_ Building \_\_\_\_\_ Date \_\_\_\_\_

Home Address \_\_\_\_\_

Phone Numbers Home \_\_\_\_\_ School \_\_\_\_\_

E-Mail \_\_\_\_\_

Current Teaching/Administrative Assignment \_\_\_\_\_

Grade(s) \_\_\_\_\_ Subject Area(s) \_\_\_\_\_ Building Level \_\_\_\_\_ # of years \_\_\_\_\_

Total Years Teaching/Administrative Experience \_\_\_\_\_ Expiration date(s) of current certificate(s) \_\_\_\_\_

Indicate type of certificate(s)/license approved for renewal \_\_\_\_\_ Provisional \_\_\_\_\_ Professional \_\_\_\_\_

Please submit a copy of each of your certificates/license with your IPDP.

Areas listed on the certificate(s) addressed by this IPDP \_\_\_\_\_

| EXPIRATION DATE | CERTIFICATE | TYPE |
|-----------------|-------------|------|
|                 |             |      |
|                 |             |      |

Credit Hours (Semester or quarter)

| SCHOOL YEAR | TOPIC | PROVIDER | HOURS |
|-------------|-------|----------|-------|
|             |       |          |       |
|             |       |          |       |
|             |       |          |       |
|             |       |          |       |
|             |       |          |       |

Total Hours \_\_\_\_\_

CEUs\*

| SCHOOL YEAR | TOPIC | PROVIDER | CEU'S |
|-------------|-------|----------|-------|
|             |       |          |       |
|             |       |          |       |
|             |       |          |       |
|             |       |          |       |
|             |       |          |       |

Total CEU's \_\_\_\_\_

*Submission of a new or revised IPDP is required following each certificate/license renewal or upgrade. One IPDP may be submitted for multiple certificates renewed on the same date provided the professional development activities are appropriate for all certificates. Return IPDP to the LPDC Committee no later than December 1 in the first year of the new renewal cycle.*

*\*10 contact hours = 1 CEU*

*\*\*20 independent hours = 1CEU (Must be **Pre approved** by the LPDC Committee)*

*\*\*\* 1 quarter hour = 2/3 semester hour*

*Please maintain copies of CEUs or professional development certificates. CEUs accumulated up to certificate or licensure will not be valid beyond effective date of certificate or license.*