AUTHORITY: Section 380.1527 of Public Act 289, 1995

## Michigan Department of Education OFFICE OF PROFESSIONAL PREPARATION SERVICES P. O. Box 30008, Lansing MI 48909 Dexter Community Schools

Note: Form should be filled out completely with specifics. Return to Human Resources by June 1st each year. Copy form as necessary if you need more space.

## Experienced Teachers ANNUAL RECORD OF PROFESSIONAL DEVELOPMENT

<u>GENERAL INSTRUCTIONS</u>: This form should be completed annually for each teacher, then signed and dated by the building principal or individual with school district authority for professional development. Each year a copy of this form should be placed in the school district personnel file and a copy provided to the teacher for their portfolio/personal record. The form must be completed each year to assist in recording professional development. (Please type or print. Make additional copies of this form as needed.) **This form is a worksheet to be completed and retained by the school district. DO NOT return this form to the Michigan Department of Education.** 

Name Of Teacher:	Social Security Number Of Teacher: XXX-XX-
Name Of School District Where Employed: Dexter Community Schools	
Name Of School Where Assigned:	
Number of Years as a Contractual Teacher (3 <sup>rd</sup> , 6 <sup>th</sup> , Etc.):	School Year Hired:
Number Of Years With Current School District:	Current School Year:
REPORTING CATEGORIES: ADJUSTING INSTRUCTION FOR STUDENTS WITH SPECIAL NEEDS, ADJ INSTRUMED FOR STUDENTS WITH SPECIAL NEEDS, ADJ INSTRUMENT OF A SECONDER OF SPECIAL STRATEGIES, BLENDED/ONLINE INSTRUCTION, CONTENT SPECIFI INTEGRATION, CULTURAL AWARENESS, CURRICULUM REVISION & ALIGNMENT ACROSS GRADES, DIFFERENT INCORPORATING TECHNOLOGY & INSTRUCTION, MENTORING (RECEIPT OF), PEDAGOGY SPECIFIC TO CONTENT OF DUAL ENROLLMENT COURSES, PREPARING TO TEACH IB, READING IN CONTENT AREA, RESISTUDENT BEHAVIOR, SCHOOL IMPROVEMENT PLANNING, USING DATA TO ADJUST INSTRUCTION, WRITING	C TO GRADE LEVEL, COOPERATIVE LEARNING, CROSS-CURRICULUM ITIATED INSTRUCTION, ENGAGING & MOTIVATING STUDENTS, ITENT, PREPARING TO BE A MENTOR, PREPARING TO TEACH ADV PONSE TO INTERVENTION (RtI), RESPONDING TO INAPPROPRIATE ACROSS THE CURRICULUM, OTHER (please be specific).
<b>Note:</b> You may enter more than one PPD activity on each date. District PPD days for 2018/2019 are 8/28, a specific information below for District Provided PPD days – please note some of the above are half days)	29, 30; 10/31; 12/4; 3/6; 4/1; 6/13, 14 (you must still enter the

low for District Provided PPD days – please note some of the above are half days)

## PROFESSIONAL DEVELOPMENT ACTIVITIES/EXPERIENCES

DATE	PROFESSIONAL DEVELOPMENT CATEGORY (See above list)	TITLE/ACTIVITY	SUMMARY OF PURPOSE/SKILL ADDRESSED	NUMBER OF HOURS ENGAGED

SIGNATURE OF IMMEDIATE SUPERVISOR TITLE				
SIGNATURE OF TEACHER DATE		DATE		

DO NOT RETURN THIS FORM TO THE MICHIGAN DEPARTMENT OF EDUCATION THIS COMPLETED FORM IS TO BE RETAINED BY THE SCHOOL DISTRICT Return to Human Resources by June 1st each year.