



Gering Public Schools

Professional Growth Report

Name: _____

Today's Date: _____

Type of Activity (Check One):

<p><input type="checkbox"/> Activity #1 – College Courses</p> <p>Graduate or undergraduate courses relating to present position or in preparation for different assignment.</p> <ul style="list-style-type: none"> 1 college credit = 1 professional growth point 6 maximum points allowable per growth period <p><u>Attach report card or transcripts.</u></p> <p>NOTE: Graduate courses must be approved by Superintendent for advancement on the salary schedule. Transcripts must be received prior to September 1 for salary schedule advancement.</p>	<p><input type="checkbox"/> Activity #2 – Auditing College Credit Courses</p> <p>Class is attended but not taken for college credit.</p> <ul style="list-style-type: none"> 1 college credit (15) contact hours = 1 professional growth point 3 maximum points allowable per growth period <p><u>Attach audit slip, certificate or note from instructor confirming attendance.</u></p>
<p><input type="checkbox"/> Activity #3 – Educational Conferences Workshops / Seminars</p> <p>Must be beneficial to present teaching field.</p> <ul style="list-style-type: none"> 8 hours / 1 day of participation = ½ professional growth point 6 maximum points allowable per growth period <p><u>Signature of administrator required below.</u></p> <p>NOTE: Must accumulate a minimum of 4 hours for credit</p>	<p><input type="checkbox"/> Activity #4 – Continuing Education</p> <p>Must be relative to present teaching position.</p> <ul style="list-style-type: none"> 8 hours of class = ½ professional growth point 2 maximum points allowable per growth period <p><u>Signature of administrator required below.</u></p> <p>NOTE: Must accumulate a minimum of 4 hours for credit.</p>
<p><input type="checkbox"/> Activity #5 – District Educational Committee Work</p> <p>Example: School Improvement Committee</p> <ul style="list-style-type: none"> 8 hours of work = ½ professional growth point 2 maximum points allowable per growth period <p><u>Attach description of committee work, dates and hours worked. Signature of chairperson required below.</u></p> <p>NOTE: Must accumulate a minimum of 4 hours for credit.</p>	<p><input type="checkbox"/> Activity #6 – Professional Organization Office / Committee Member</p> <p>Must be related to educational field at state / national level.</p> <ul style="list-style-type: none"> 8 hours of work = ½ professional growth point 1 maximum point allowable per growth period <p><u>Attach program, agenda or minutes –OR- have chairperson sign below.</u></p> <p>NOTE: Must accumulate a minimum of 4 hours for credit.</p>
<p><input type="checkbox"/> Activity #7 – Supervision Of Student Teacher</p> <ul style="list-style-type: none"> 1 term (8 weeks) = 1 professional growth point 2 maximum points allowable per growth period <p><u>Signature of administrator required below.</u></p>	<p><input type="checkbox"/> Activity #8 – Presenter At GPS / Regional Schools Staff Development</p> <p>Presentation must be related to educational topic.</p> <ul style="list-style-type: none"> 1 hour presentation = 1 professional growth point 2 maximum points allowable per growth period <p><u>Superintendent signature required below.</u></p>

<input type="checkbox"/> <u>Activity #9 – Presenter At Regional, State Or National Conference</u> Presentation must be related to educational topic. <ul style="list-style-type: none"> • 1 hour presentation = 1 professional growth point • 2 maximum points allowable per growth period <p><u>Attach copy of conference program with your name highlighted.</u></p>	<input type="checkbox"/> <u>Activity #10 – Other Activities As Approved</u> Example: District staff development / accreditation team. <ul style="list-style-type: none"> • 8 hours / 1 day of participation = ½ professional growth point • 6 maximum points allowable per growth period <p><u>Superintendent signature required below.</u></p> <p><u>NOTE:</u> Pre-approval by Superintendent is recommended if activity is not district-sponsored. Participation must be a minimum of 4 hours or accumulate to 4 hours, unless deemed differently by the Superintendent.</p>
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Employee Name: _____

Description of Activity Performed / Attended: _____

Location / Hosted By: _____

Activity Date(s): _____

of Hours Participated (if applicable): _____ **Anticipated Growth Point Increase:** _____

Name of Student Teacher (if applicable): _____

Signature of Administrator / Chairperson (if applicable): _____

***** Send completed forms to Central Office – ATTN: Professional Growth *****

<u>FOR CENTRAL OFFICE USE ONLY!</u>	
Approval Date: _____	Signature: _____
Rejection Date: _____	Reason: _____
Entered On: _____	By: _____