

**LAKE HAMILTON SCHOOL DISTRICT  
PROFESSIONAL DEVELOPMENT  
FLEX FORM**

**SCHOOL YEAR:** \_\_\_\_\_

**Definition:** Professional Development flex day or flex hours means prior approved flex day(s) or flex hour(s) earned in lieu of or substituted for activities scheduled on the school district's Professional Development Calendar.

**NOTICE:**      **This flex day form MUST have prior approval from your building principal BEFORE you attend this professional development activity.**

Teacher's Name: \_\_\_\_\_

Today's Date: \_\_\_\_\_

School: (campus) \_\_\_\_\_

Name of Workshop/Training/Graduate Class\* \*\*

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Date and Place of Workshop/Training/Graduate Class

Date: (m/d/y) \_\_\_\_\_ Place: \_\_\_\_\_

Name of Sponsor for Workshop/Training/Graduate Class

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Description of how this Workshop/Training/Graduate Class addresses your PIC=Professional Improvement Commitment or your school's ACSIP Plan.

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Description of how this training will be used to improve your classroom instruction and the academic achievement of your students.

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- No more than half (up to 30 hours) of professional development credit may be approved for graduate level college credit courses. A three-hour graduate credit college course counts as ~~42~~ 15 hours of professional development if the college credit is related to and enhances the teacher's knowledge of the subject area in which the teacher is currently teaching or is part of the requirements for a teacher to obtain additional certification in a subject matter that has been designated by the ADE as having a critical shortage of teachers. (Teacher must apply through ADE for approval—see attached form)
  - Allowable coaching clinic hours will be proportional to the number of class periods assigned to coaching.

Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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(Information below --To be completed by Principal)

COST: \_\_\_\_\_

Payable to: \_\_\_\_\_

Funding Source: \_\_\_\_\_