

**UNIFIED SCHOOL DISTRICT #273  
Professional Development Plan Worksheet**

Licensed Staff and Classified Staff Form

School Year: 2022-23

*All points earned require PRE-APPROVAL (with the exception of district inservices and committee work)*

Employee's Name: \_\_\_\_\_ Employee's Signature: \_\_\_\_\_

Building/School: \_\_\_\_\_

Assignment: \_\_\_\_\_

Certificate Effective Date: \_\_\_\_\_ Certificate Expiration Date: \_\_\_\_\_

Highest Degree Earned: \_\_\_\_\_  
Date: \_\_\_\_\_  
Administrator's Signature: \_\_\_\_\_

Date: \_\_\_\_\_  
PDC Chairperson's Signature: \_\_\_\_\_

**College hours earned 2022-2023 school year:**

Course Name: _____	Course Name: _____
Course Completion Date: _____	Course Completion Date: _____
No. Hour/s: _____ No. Points: 0	No. Hour/s: _____ No. Points: 0
College: _____	College: _____

**DOCUMENTATION (grade card, transcript):  
MUST BE SUBMITTED TO THE BOE OFFICE by the end of the school year  
for credit towards salary movement.**

**Goals:**

1	_____
2	_____
3	_____
4	_____
5	_____

Unified School District #273  
Beloit Special Education Cooperative

Total Points Page 2	_____	0
Total Points Page 3	_____	0
Total Points Page 4	_____	0
Total Points Page 5	_____	0
College Hours	_____	0
College Points	_____	0

Grand Total Points - **Relicensure** 0

Grand Total Points - **Salary Movement** 0

## KNOWLEDGE LEVEL - Salary Movement and/or Relicensure

Activities Level 1: Knowledge	Addresses Goal #	C, PE, SP	Date	Hours	Implement Points	Points
A.						0
Verification:						
B.						0
Verification:						
C.						0
Verification:						
D.						0
Verification:						
E.						0
Verification:						
F.						0
Verification:						
G.						0
Verification:						
H.						0
Verification:						
I.						0
Verification:						
J.						0
Verification:						
K.						0
Verification:						
L.						0
Verification:						
M.						0
Verification:						
N.						0
Verification:						
O.						0
Verification:						
<b>Total Points Page 2</b>						<b>0</b>

APPLICATION LEVELS 2 & 3 - Relicensure for Licensed Staff or State Required hours for Paras Only				
Activities Level 2: Application (Must include proof of application)	Addresses Goal #	C, PE, SP	Date/s	Points
A.				0
Verification:				
Related Knowledge Activity:		Date:	Points Awarded:	
B.				0
Verification:				
Related Knowledge Activity:		Date:	Points Awarded:	
C.				0
Verification:				
Related Knowledge Activity:		Date:	Points Awarded:	
D.				0
Verification:				
Related Knowledge Activity:		Date:	Points Awarded:	
Activities Level 3: Impact (Must include proof of impact)	Addresses Goal #	C, PE, SP	Date/s	Points
A.				0
Verification:				
Related Application Activity:		Date:	Points Awarded:	0
Related Knowledge Activity:		Date:	Points Awarded:	
B.				0
Verification:				
Related Application Activity:		Date:	Points Awarded:	0
Related Knowledge Activity:		Date:	Points Awarded:	
Total Points Page 3				0



**KNOWLEDGE LEVEL *continued* - Salary Movement and/or Relicensure**

Activities Level 1: Knowledge	Addresses Goal #	C, PE, SP	Date	Hours	Implement Points	Points
P.						0
Verification:						
Q.						0
Verification:						
R.						0
Verification:						
S.						0
Verification:						
T.						0
Verification:						
U.						0
Verification:						
V.						0
Verification:						
W.						0
Verification:						
X.						0
Verification:						
Y.						0
Verification:						
Z.						0
Verification:						
AA.						0
Verification:						
BB.						0
Verification:						
CC.						0
Verification:						
DD.						0
Verification:						
<b>Total Points Page 5</b>						<b>0</b>

College hours earned 2022-2023 school year:									
Course Name:					Course Name:				
Course Completion Date:					Course Completion Date:				
No. Hour/s:		No. Points:			No. Hour/s:		No. Points:		
				0					0
College:					College:				
Course Name:					Course Name:				
Course Completion Date:					Course Completion Date:				
No. Hour/s:		No. Points:			No. Hour/s:		No. Points:		
				0					0
College:					College:				
Course Name:					Course Name:				
Course Completion Date:					Course Completion Date:				
No. Hour/s:		No. Points:			No. Hour/s:		No. Points:		
				0					0
College:					College:				
Course Name:					Course Name:				
Course Completion Date:					Course Completion Date:				
No. Hour/s:		No. Points:			No. Hour/s:		No. Points:		
				0					0
College:					College:				
								College Hours	0
								College Points	0