

**INDIVIDUAL PLAN
REQUEST FOR USING COLLEGE COURSE
FOR STAFF DEVELOPMENT CREDIT**

I, _____, ID# _____

an employee of the Lewis County Board of Education assigned to _____
School/Department(s) request that I be permitted to receive Staff Development Credit for the following
Course(s):

****Name and number of Course** _____

College or University attended _____

Date (semester) _____ College Credit Hours _____

****Name and number of Course** _____

College or University attended _____

Date (semester) _____ College Credit Hours _____

****Name and number of Course** _____

College or University attended _____

Date (semester) _____ College Credit Hours _____

NOTE:

Employees will receive Staff Development Credit based on the number of contact hours.
(Example, 3 hour class = 45 hours, 2 hour class – 30 hours, 1 hour class = 15 hours)

After completion of the course(s), some form of acceptable verification (transcript) must be
attached to this request when submitted to the Staff Development Coordinator/Council for
approval.

Signature: _____ Date: _____

Approval of:

Principal/Supervisor: _____ Date: _____