AUTHORITY: Section R390.1135

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

DISTRICT PROVIDED PROFESSIONAL DEVELOPMENT **RECORD FOR CERTIFICATE RENEWAL**

professional development (Sec. 380,1527) hours, this form must signed by your Principal or District Designee . Education Certificates and Occupational Education Certificates. To receive credit for the district provided provided by their school district. These professional development hours can only be used to renew Professional INSTRUCTIONS: This form must be completed by the individual requesting renewal credits for professional development

Name Of Teacher:	Teacher PIC* or SSN:	
Emall:	Phone:	
ou must include cor	ou must include contact information to receive notification from Michigan Department of Education to complete the process	e process.
School Year: 20_	- 20 (One School Year per form – duplicate as necessary)	
lame Of School Distr	Vame Of School District Where Employed:	
lame Of School Where Assigned:	re Assigned:	
DATE(S)	DISTRICT PROVIDED PROFESSIONAL DEVELOPMENT ACTIVITY	NUMBER OF HOURS ENGAGED
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Did this teacher	Did this teacher complete all 5 days offered by the district for the listed school year? Yes / No	/ No
		Principal/Designee Initials
SIGNATURE OF PRI	SIGNATURE OF PRINCIPAL/DISTRICT DESIGNEE:TITLE	
SIGNATURE OF TEACHER	ACHER	DATE
Personal Identification Code	Personal Identification Code (PIC) can be obtained by logging in to the Michigan Online Educator Certification System (www.michigan.gov/moecs) and clicking on "Manage Demographics"	'Manage Demographics''