



UNION COUNTY SCHOOLS P.O. Box 907 UNION, SC 29379

Renewal Computation Sheet

Last name	First name	M.I.	Grade Level Employed
Social Security # (Last 4)	SC Licensure # (required)	Highest Degree	

OPTION/DESCRIPTION/MAXIMUM POINTS

Course No./Title	Ending Date	Administrator's Preapproval (If required)	Credits Earned
Option 1: College Credit (120)			
Graduate Course No./Title	College		
Undergraduate Course No./Title	College		
Option 2: SDE Renewal Course (120)			
Course No./Title	Location		
Course No./Title	Location		
Option 3: SDE approved CEU credit (120)			
Activity	Location		
Activity	Location		
Option 4: Publications (60)			
Title	Publisher	Date Published	
Title	Publisher	Date Published	
Option 5: Instruction (60)			
Workshop or Course Title	Location		
Workshop or Course Title	Location		
Option 6: Professional Training (120)			
Title	Sponsoring Organization/Agency		
Title	Sponsoring Organization/Agency		
Option 7: Professional Assessor/Evaluator (60)			
Type	Duties		
Type	Duties		
Option 8: Mentorship, Supervision, or Mentoring (60)			
Type			
Type			
Type			
Type			
Continued on page two...			

Course No/Title	Ending Date	Administrator's Preapproval if required	Points Earned
Option 9: Educational Project, Collaboration, Grant, or Research (60)			
Type of Project, Collaboration, Grant, or Research			
Type of Project, Collaboration, Grant, or Research			
Option 10: Professional Development Activity (60)			
Title Sponsoring Organization/Agency			
Title Sponsoring Organization/Agency			
Option 11: Professional Development Activity – CEU Credit (120)			
Title			
Title			
Title			
Title			
Total Renewal Credits Earned > >			

The renewal credit listed on this computation sheet has been reviewed and accepted under the SDE Renewal Credit Plan toward this educator's professional license renewal. The educator maintains the verification for each of these activities, and we request these credits to be entered into the educator's licensure records.

The Jason Flatt Act requirement has been satisfied by this educator (mm/yyyy) _____

Signature of Educator: _____ **Date:** _____

Signature of Renewal Coordinator: _____ **Date:** _____