

## USD 339-Jefferson County North INDIVIDUAL DEVELOPMENT PLAN 2020-21

Name \_\_\_\_\_ Building \_\_\_\_\_  
 Certificate Expiration \_\_\_\_\_ Educator ID \_\_\_\_\_  
 Grade Level(s) \_\_\_\_\_ Subject Area(s) \_\_\_\_\_

PROFESSIONAL IMPROVEMENT GOALS District goals are included. List any individual goals you plan to pursue.	LABEL EACH GOAL AS: Content Knowledge Professional Education Service to Profession
<b>DISTRICT GOALS</b> <ul style="list-style-type: none"> <li>▪ Staff will incorporate Kansas social and emotional standards.</li> <li>▪ Staff will create and implement the Kansas Education Systems Accreditation building goals for relevance and responsive culture.</li> <li>▪ Staff will utilize technology resources to enhance classroom instruction with an emphasis on 21st century skills.</li> <li>▪ Staff will evaluate, choose, and implement tiered strategies, which assist all students to improve skills in reading or math.</li> </ul>	<p>Professional Education</p> <p>Professional Education</p> <p>Professional Education</p> <p>Professional Education</p>
<b>INDIVIDUAL GOALS</b> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol>	

Applicant's Signature	Date
Building Administrator Signature	Date
PDC Chairperson Signature	Date
Superintendent Signature	Date

## USD 339-Jefferson County North Criteria for Awarding Professional Development Points

Level	Points
<p>Level 1 – Knowledge Based Activity (Appendix D) Attendance at sessions related to improvement of student learning. These sessions can include workshops, conferences, seminars, or study groups.</p>	1 point per contact hour
<p>Level 2 – Application (Appendix D - side 2) Show evidence of application of knowledge gained using at least three of the following indicators</p> <ul style="list-style-type: none"> <li>Teacher created resources/units</li> <li>Student product</li> <li>Teacher log/journal</li> <li>Web-based sharing (ie Blog, Teachers Pay Teachers)</li> <li>Publication in Newspaper or Educational Magazine</li> <li>Presentation at local level (BOE, Site Council)</li> <li>Classroom observation by administrator</li> <li>Video Presentation showing application</li> <li>Other indicator (may need advanced approval of PDC)</li> </ul>	2x knowledge points or as designated by district PDC
<p>Level 3 – Impact (Appendix D - side 2) Follow-up indicating long term implementation and benefit to learning process. Within one year or a logical cycle following implementation, use two additional indicators from this list to provide evidence of impact on student learning or of sharing professional development with peers.</p> <ul style="list-style-type: none"> <li>Student achievement</li> <li>Teaching other teachers/Peer coaching</li> <li>Presentation at a Conference/training teachers from other districts</li> <li>Formal data collection</li> <li>Other indicator (may need advanced approval of PDC)</li> </ul>	3x knowledge points or as designated by district PDC
<p>Example: A teacher attends an activity on using math problem solving strategies that involves attending <u>6 hours of training</u>. Appendix D is completed for Validation of Knowledge gained and 6 in-service points are awarded. Following the training, the teacher implements the knowledge in the classroom and prepares a Unit of study based on the strategies learned. A description of the unit, along with a student product from the unit, and a journal describing successes/challenges are submitted to the PDC along with Appendix D-side 2, for Validation of Application. An additional 12 points (original 6 points x 2) are awarded. The following school year the teacher continues to implement the strategies and shows further student impact. The teacher teaches fellow teachers to use the strategies and tracks student achievement showing improvement because of the strategies. Documentation showing these effects is submitted to PDC along with Appendix D-side 2 for Validation of Impact. An additional 18 points are awarded (original 6 points x 3). In the two years the teacher has earned a total of 36 in-service points based on the one 6 hour in-service activity.</p>	

**USD 339-Jefferson County North  
Professional Development Activity Request**

Name \_\_\_\_\_ Building \_\_\_\_\_

Name of Workshop/Activity \_\_\_\_\_

Location of Activity \_\_\_\_\_ Date of Activity \_\_\_\_\_

Which goals from your PDP will this activity support? \_\_\_\_\_

Sponsoring Organization: (e.g. Keystone, South Central ESC, Greenbush)

**Attach copy of activity program or description.**

Is this activity: \_\_\_\_\_ Content Knowledge or \_\_\_\_\_ Professional Education

What knowledge or skills do you hope to acquire from this activity?

Level of implementation anticipated? \_\_\_ Knowledge \_\_\_ Application \_\_\_ Impact

Hours involved in workshop? \_\_\_\_\_ Dates substitute is needed: \_\_\_\_\_

School vehicle needed? yes / no \_\_\_\_\_

Cost: \_\_\_\_\_ registration \_\_\_\_\_ lodging \_\_\_\_\_ meals \_\_\_\_\_ **Total**

***Principal approval***

Yes _____ No _____	Reason
_____ Principal's signature <span style="float: right;">date</span>	

***Superintendent approval***

Yes _____ No _____	Reason
_____ Superintendent's signature <span style="float: right;">date</span>	

Be sure to also complete a leave request if a substitute is needed and a school vehicle request if desired.

**USD 339-Jefferson County North  
Validation of Professional Development Activity  
PART 1: Knowledge Gained**

Name \_\_\_\_\_ Grade level \_\_\_\_\_

Name of Workshop/Activity \_\_\_\_\_

Location of Activity \_\_\_\_\_ Date of Activity \_\_\_\_\_

Sponsoring Organization \_\_\_\_\_

What goal from your PDP was addressed? \_\_\_\_\_

Choose one: \_\_\_\_\_ Content Knowledge \_\_\_\_\_ Professional Education

Describe how this activity connects to district outcomes, the school improvement plan, or your individual development plan.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you plan to follow up with long-term implementation? \_\_\_\_\_ yes \_\_\_\_\_ no

How many hours were you in attendance? \_\_\_\_\_ (points requested)

**Attach proof of attendance**

Applicant's Signature	Date
Building Administrator's Signature	Date
PDC Chairperson's Signature	Date

**Number of Points Approved by PDC** \_\_\_\_\_

Not Approved (explanation)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**USD 339-Jefferson County North**  
**Validation of Professional Development Activity**  
**PART 2: Application and Impact**  
Knowledge level points must have been previously approved.

Name \_\_\_\_\_ date of original points \_\_\_\_\_

Name of Workshop/Activity \_\_\_\_\_

**LEVEL 2: Application of Knowledge:** Check at least 3 indicators and **attach documentation** necessary for each one. Date \_\_\_\_\_

- |  |   |
|--|---|
| <input type="checkbox"/> Teacher created resources/units                         | <input type="checkbox"/> Student product                        |
| <input type="checkbox"/> Web Based presentation (ie Blog, Teachers Pay Teachers) | <input type="checkbox"/> Teacher log/journal                    |
| <input type="checkbox"/> Classroom observation by administrator                  | <input type="checkbox"/> Video Presentation showing application |
| <input type="checkbox"/> Publication in Newspaper or Educational Magazine        | <input type="checkbox"/> Presentation at local level            |
| <input type="checkbox"/> Other indicator (may need advanced approval of PDC)     |   |

Application Points Requested: \_\_\_\_\_ Level 1 Knowledge points \_\_\_\_\_ x 2= \_\_\_\_\_

Applicant's Signature	Date
Building Administrator's Signature	Date
PDC Chairperson's Signature	Date

Not Approved (explanation) \_\_\_\_\_

**LEVEL 3: Impact of Application:** Check at least 2 additional indicators and **attach documentation** necessary for each one. date \_\_\_\_\_

- |  |   |
|--|---|
| <input type="checkbox"/> Student achievement   | <input type="checkbox"/> Formal data collection |
| <input type="checkbox"/> Web-based sharing of information (two way instructional presentation) |   |
| <input type="checkbox"/> Leading staff development within the district /peer teaching          |   |
| <input type="checkbox"/> Presentation at conference or staff development outside of district   |   |
| <input type="checkbox"/> Other indicator (w/ advanced approval)                                |   |

Impact Points Requested: \_\_\_\_\_ Level 1 Knowledge points \_\_\_\_\_ x 3= \_\_\_\_\_

Applicant's Signature	Date
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PDC Chairperson Signature	Date

**USD 339-Jefferson County North  
Validation of College Credit or Continuing Education**

Name \_\_\_\_\_ Building \_\_\_\_\_

Name of Class \_\_\_\_\_

Date/semester of class \_\_\_\_\_

Sponsoring University or College \_\_\_\_\_

If this is an On-Line college-- what is the accrediting association? \_\_\_\_\_

Choose one: \_\_\_\_\_ Content Knowledge \_\_\_\_\_ Professional Education

**Attach transcript or proof of attendance or  
check here if transcript is on file in district office \_\_\_\_\_**

Briefly describe the class and tell how it has improved you as a teacher.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Credit hours \_\_\_\_\_ x 20 = \_\_\_\_\_ Professional Development points

Applicant's Signature	Date
Building Administrator's Signature	Date
PDC Chairperson's Signature	Date

**Number of Points Approved by PDC \_\_\_\_\_**

Not Approved (explanation)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

On-line university accreditation checked by PDC \_\_\_\_\_

Not Approved (explanation) \_\_\_\_\_

**USD 339-Jefferson County North  
Validation of Service to the Profession**

Name \_\_\_\_\_ Building \_\_\_\_\_

Name of Organization or Activity (see PDC guidelines for more information)  
\_\_\_\_\_

Location \_\_\_\_\_

Dates and times of service \_\_\_\_\_

Describe the time spent or work involved and how it related to your professional development.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Attach documentation showing your involvement**

Number of hours involved in service? (1 hour = 1 point) \_\_\_\_\_ points requested

Applicant's Signature	Date
Building Administrator's Signature	Date
PDC Chairperson's Signature	Date

**Number of Points Approved by PDC \_\_\_\_\_**