CONTINUING EDUCATION CLOCK HOUR APPLICATION
(Please complete ALL areas on form)

Name__________________________________________________________   File Folder #_____________________

Licensure Area for which clock hours are  being requested: (Multiple license holders should allocate at least 30 hours to each area with priority given to the area of employment.)

____________________________________________________________ Year of Expiration: _________________
(LICENSURE AREA)

School/Building Location________________________________________   Date Submitted: ___________________

If your forms cannot be returned to you through interschool mail, please enclose a self-addressed, stamped envelope, large enough for return of your materials, as well as a phone number that you can be contacted at.

Phone # ___________________________

VERIFICATION OF PARTICIPATION

Name of Activity____________________________________________ Date of Activity_______________________

Sponsoring Agency_________________________________________ Clock Hours Requested _______________

Activity Category (see back) ____________

Request for:

_____ Pre-approval of clock hours for travel/work experience subject to actual completion (activity is pre-approved once initialed by Continuing Ed Committee chairperson). Explain how this experience will improve your instructional ability.

_______________________________________________________________________________________
_______________________________________________________________________________________

_____ Final approval of clock hours for professional activity completed

ADDITIONAL STATE REQUIREMENTS (SEE BACK OF FORM)

☐ This activity addressed positive behavioral intervention strategies.
☐ This activity addressed modification, accommodation, or adaptation of curriculum, instruction, or materials for students with special needs.
☐ This activity addressed further reading preparation.
☐ This activity addressed further preparation in understanding the key warning signs of early-onset mental illness in children and adolescents.
☐ This activity addressed technology integration.
☐ This activity addressed reflective statement of professional accomplish & assessment of professional growth.
☐ This activity evidence of growth in best practices for meeting the needs of English learners.

PARTICIPANT’S SIGNATURE________________________________________ VERIFIER’S SIGNATURE (in-district activities) OR ATTACHMENT OF VERIFICATION DOCUMENT (outside of district)

FOR LOCAL COMMITTEE USE ONLY

Approval______ Not Approved _______ Clock Hours _______

REASON:

COMMITTEE MEMBER SIGNATURE __________________________ DATE ___________________
CLOCK HOUR CATEGORIES

Applicants must include in their 125 clock hours instruction or other professional development activities which address:

- positive behavioral intervention strategies.
- accommodation, modification, or adaptation of curriculum, materials, or instruction to appropriately meet the needs of varied students in achieving graduation standards.
- further reading preparation consistent with Minnesota Statutes, section 122A.06, subdivision 4.
- further preparation in understanding the key warning signs of early-onset mental illness in children and adolescents.

Please Note: Teachers who do not provide direct instruction including counselors, school psychologists, school nurses, school social workers, audiovisual directors and coordinators, and recreation personnel are exempt from the reading requirement. MN statute 122A.09, subdivision 4(m).

Clock hours must be earned in two or more of the categories A through I. Unless otherwise noted, one hour of participation equals 1 clock hour.

A. College/Board Credit: College courses/Audited Courses/Board Credits
   One quarter credit equals 16 clock hours, one semester credit equals 24 clock hours, one board credit equals 10 clock hours.

B. Workshops/Conferences: Educational workshops, conferences, institutes, seminars, or lectures in areas appropriate to licenses held.

C. Staff Development/Inservices: Staff development activities, inservice meetings, and inservice courses.

D. Curriculum Development: Building, district, regional, state, national, or international curriculum development.

E. Peer Coaching/Mentorship: Engagement in formal peer coaching or mentorship relationships with colleagues that addresses one or more of the standards listed at the top of this page.

F. Professional Service:
   1. Supervision of clinical experiences of persons enrolled in teacher preparation programs (student teaching). One quarter equals 16 clock hours, one semester equals 24 clock hours. No more than 30 clock hours may be granted in a five-year relicensure period.
   2. Participation on national, state, and local committees involved with licensure, teacher education, or professional standards.
   3. Participation in national, regional, or state accreditation.

G. Leadership Experiences:
   1. Development of new or broader skills and sensitivities to the school, community, or profession.
   2. Publication of professional articles in a professional journal in an appropriate field.
   3. Volunteer work in professional organizations related to the areas of licensure held.

H. Other Educational Opportunities: To enhance knowledge and understanding of diverse educational settings in the following areas:
   1. Experiences with students at another age, ability, culture, or socioeconomic level.
   2. Systematic, purposeful observation during visits to schools and related business and industry.

I. PRE-APPROVED Travel or Work Experience: One week equals 10 clock hours. No more than 30 clock hours may be granted in a five-year relicensure period.
   1. Travel for purposes of improving instructional capabilities related to the field of licensure.
   2. Work experience in business or industry appropriate to the field of licensure.