

**YELLOW SPRINGS LPDC  
INDIVIDUAL PROFESSIONAL DEVELOPMENT PLAN (IPDP)**

Name \_\_\_\_\_ Date \_\_\_\_\_

Current Assignment \_\_\_\_\_ Building \_\_\_\_\_

<b>FOR LPDC USE ONLY</b>			
Date processed _____	Approved _____	Revision needed _____	Denied _____
YSLPDC Chair Signature _____			

1. Attach a typed copy of your 5-year Professional Development Plan to this form. (List 2-4 goals that you wish to work on during the next licensure period.)
2. Attach a copy of your certificate. If you have more than one, attach a copy of each.
3. Credit Hours (Provide copies of transcripts or grade reports to LPDC).

Course	Topic	Provider	Hours

4. CEU's (Provide documentation to YSLPDC)

School Year	Topic	Provider	CEU's

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Are you pursuing any additional certification/licensure areas outside a regular degree program during this renewal cycle? (circle one)    yes    no

If you answered "yes," please complete the following.

College/University \_\_\_\_\_

Certification/Licensure area(s) \_\_\_\_\_

Anticipated completion date \_\_\_\_\_

Provide a brief rationale for pursuing this (these) certification/licensure area(s).

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Will you be enrolled in a graduate program during this renewal cycle? (circle one)    yes    no

If you answered "yes," please complete the following.

College/University \_\_\_\_\_

Degree \_\_\_\_\_ Anticipated completion date \_\_\_\_\_

Provide a brief rationale for pursuing this degree.

Applicant Signature \_\_\_\_\_