



# Professional Growth Application/Verification

## Norfolk Public Schools – Norfolk, Nebraska

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 School: \_\_\_\_\_ Date: \_\_\_\_\_

- Application for Professional Growth points
- Request to start new growth period September 1, \_\_\_\_\_ (year)  
 (You must have already met the 24-point requirement for current growth period and submit request by **May 31<sup>st</sup>**)

**Prof. Growth submission deadlines:**  
September 1<sup>st</sup> – Summer points  
January 31<sup>st</sup> – First semester points  
May 31<sup>st</sup> – Second semester points;  
 yearly committee points; request for  
 new Professional Growth Period

College Credit: 1 credit hour = 4 points (Note: Verified <u>audit</u> of course – 1 credit hour = 1 point)				Office use only
College	Course Title	Credit Hours	Month/Year Completed	Points Approved

*Dated grade slip or transcript must be attached      Applicant's signature required on back of form*

**Student Teacher/Clinical Student:** (Maximum – 12 points per growth period)

√ Student Teacher: ( 6 points per semester)  
 √ Clinical Student: Record the number of contact hours the student was required to complete (20 contact hours = 1 point)

Student Teacher     Clinical Student/Intern    Student's Name: \_\_\_\_\_

Number of contact hours required for clinical student/intern: \_\_\_\_\_

Was the student shared with another teacher?     Yes     No

Office use only
Points Approved

If yes, what was your percentage:      %

**Applicant's signature and administrator's verification required on back of form**

Professional Meetings: Workshops, training, district presentations, etc. (Maximum – 12 points during <b>contract time</b> in a growth period)				Office use only
Activity	Contract/Non-Contract Time Personal Day Professional Day	Date(s) Attended	Hours Applied For	Points Approved

**Applicant's signature and administrator's verification required on back of form**

Pre-Approved Activities: School committee/curriculum work, NPS tech training, accreditation review, etc.				Office use only
Activity	Contract/Non-Contract Time Personal Day Professional Day	Date(s) Attended	Hours Applied For	Points Approved
<i>Applicant's signature required below</i>				

Webinars or Internet In-Service Activities: 3 viewing hours = 1 point			Points Approved
<i>(Must be pre-approved by a district administrator)</i>	Date(s)	Hours	Points Approved
<i>Applicant's signature and administrator's verification required below</i>			

**Applicant Signature:** *I certify the information provided is true and complete to the best of my knowledge.*

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

Date: \_\_\_\_\_

**Administrator's Verification of Activity:**

Verification Signature\*: \_\_\_\_\_

Title/Position: \_\_\_\_\_ Date: \_\_\_\_\_

*\*Presenter/building principal – you cannot verify your own activity.*

**Professional Growth Office Use Only:**

Points approved: \_\_\_\_\_ Total points to-date: \_\_\_\_\_ End of Professional Growth Period: August 31, \_\_\_\_\_

Explanation for points **not** approved:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

Professional Growth Assistant Initials: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

*Any questions pertaining to points awarded should be referred to the Director of Human Resources/Accreditation. For more information on Professional Growth please refer to the district website: District, Human Resources, Professional Growth, Professional Growth Policy.*

**Submit signed form to: [Teach@npsne.org](mailto:Teach@npsne.org) or put on delivery to "Professional Growth - Central Office"**