



Schuylkill IU 29
ACT 48 Profession Development
Non IU 29 Activity

(Use when provider will not submit ACT 48 hours to PDE)

Check one:
IU 29
STC

ATTACH COPY OF SIGNED CONFERENCE REQUEST FORM

PRE-APPROVAL SECTIONS I, II, & III (MUST be completed PRIOR to activity)

Section I: Completed by IU 29 employee holding a PA EDUCATION CERTIFICATE (Please Print)

Form for Section I containing fields for Last Name, First Name, M.I., PPID Number, Department, Date Submitted, Title of Activity, Date of Activity, Provider, Presenter, and Location (Complete Address).

Section II: Completed by IU 29 employee

Check one Subject Area and X Check one Subject Category - Description related to that Subject Area.

Form for Section II containing multiple subject area categories such as Teaching and Learning Professional Development, Standards Area Curriculum and Assessment, Academic Content Studies, Technology, Student Social and Health Issues, School Administration (Non-PIL), and PA Inspired Leadership (PIL) Induction, each with sub-categories and descriptions.

Section III: Pre-Approval Completed by IU 29 Supervisor & Director of Educational Services

ACT 48 Pre-Approval: <input type="checkbox"/> YES <input type="checkbox"/> NO	IU 29 Supervisor	IU 29 Director of Educational Services
Reason not pre-approved:	Signature	Signature
	Date	Date

APPROVAL SECTIONS IV, V

(Submit documentation within 2 weeks after completion of activity with validated attendance documentation)

Section IV: Completed by IU 29 employee and submitted with acceptable documentation

Start Date: _____	Start Time: _____				
End Date: _____	End Time: _____	Clock Hours: _____	Employee Signature: _____		

Section V: Completed by IU 29 Director of Educational Services

ACT 48 Approval: <input type="checkbox"/> YES <input type="checkbox"/> NO	IU 29 Director of Educational Services
Reason not approved:	Signature
	Date

• **Acceptable documentation of attendance:**

- **CERTIFICATE or LETTER OF ATTENDANCE** that includes: session title, date(s), session time, hours of attendance, and signature validation of the workshop/conference provider.
- **Submit to:** Schuylkill IU 29
Act 48 Records Division
PO Box 130, 17 Maple Avenue
Mar Lin, PA 17951

Revised: August 2010