Professional Development Stipend Application Article XIV (pg 17 ATA CBA)

Return to the ATA President once completed

Name:	Da	te:	Content Are	Content Area:				
			•					
Number of hours you are applying for								
What evidence will you provide for completion? Mark at least one.		Course certificate	Completed outline	Picture or video of Project	Project shared with staff			
Briefly describe your proposal. Be sure to include the category of professional development your request fits into. Also include all necessary information required for that category. See descriptions below for guidance.								
Professional Development Category (see * below)								
Proposal Description:								
For Committee Use								
☐ Proposal Approved		☐ Proposal Rejected						
If rejected, reasons for rejection Did not meet requirements set forth in contract Description was incomplete Prior approval was not obtained Other:								
Applicant Signature								
Administrator Signature								
Committee Member Signature								
Committee Member Signature								

Category 3: **Study Group** - Describe your study group and how its work will improve teaching strategies and student outcomes.

^{*}Category 1: **In-Service Workshop** - includes course title, who is offering it, how it relates to your content area, agenda or itinerary.

Category 2: **Curriculum Writing** - include description of the teaching aides, manipulatives, or learning centers you are creating and how they will benefit the students in your room.

Professional Development Stipend Completion Form

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١	Name:		Date:		Content Area:			
 Please compile your completion evidence for in-service workshop, curriculum writing, or study group work in a folder (digital or physical), along with this completion form. Upon completion of 15 hours, please notify the stipend committee for review of the file and approval of payment. Notification will then be sent to the superintendent's office for payment. 								
	Date	Number of Hours		Name	of Course or Project Description			
Applicant Signature								
	Administrator	Signature						
	Committee Me	ember Signature						
Committee Member Signature								
Superintendent Signature								