



## Professional Development

Pulaski County Special School District  
925 Eat Dixon Rd.  
Little Rock, Arkansas 72206  
(501) 234-2061

# Professional Development Pre-Approval for Outside Professional Development Credit

(This form is used for Outside PD NOT to be used as Flex credit)

## Teacher Information

Name: \_\_\_\_\_

School/ Department: \_\_\_\_\_

Position: \_\_\_\_\_

## Professional Development Training Information

Title: \_\_\_\_\_

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

Number of Hours: \_\_\_\_\_

Location: \_\_\_\_\_

## Professional Development Focus Area

(Check all that apply)

- Professional Growth Plan  
 Parental Involvement

_____	_____	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Coordinator/Principal Signature	Date		
_____	_____	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Director of Professional Development Signature	Date		

*This document must be signed at least two weeks prior to the PD event to receive credit.  
This form must be turned in with other documentation within 60 days after the last day of the event.  
Attached documentation should include: Certificate indicating number of hours, copy of the sign-in sheet, letter verifying attendance, or conference stickers and the official agenda identifying workshops attended with time.*