**Continuing Education Hour Approval Form**

 **Goodhue County Education District**

Complete all information below, attach verification of participation, and **forward to Emily Grobe at River Bluff Education Center**. After the committee has processed the request, the form will be returned to you to keep on file.

**Name:**  **School:**

**Area of Licensure: File Folder #:**

**Date of Experience: Hours Completed:**

**Title of Experience:**

Did the experience address any of the following renewal requirements? (Check all that apply)

Positive behavioral intervention strategies (PBIS) \_\_\_\_\_

Reading preparation \_\_\_\_\_

Warning signs of early on-set mental illness in adolescents \_\_\_\_\_

Suicide prevention (minimum of 1 hour) \_\_\_\_\_

English language learner strategies \_\_\_\_\_

Cultural Competency (renewal 2020 and after) \_\_\_\_\_

\*\*Documentation of participation is required (transcript, certificate or letter documenting your participation) and must be attached. Documentation must include: title, date, hours earned \*\*

Category Approved: A \_\_\_ B\_\_\_ C \_\_\_ D \_\_\_ E \_\_\_ F \_\_\_ G\_\_\_ H \_\_\_ I \_\_\_

\*\*Items B to I are granted one clock hour for every hour of participation, unless otherwise specified. Clock hours must be earned in two or more of the categories I items A to I per Minnesota Rule 8710.7200, Subpart 3\*\*

1. Relevant Coursework (1 semester credit=24 clock hours; 1 quarter credit=16 hours)
2. Workshops, conferences, seminars
3. Staff development, in-service
4. Curriculum development
5. Engagement in formal peer coaching or mentoring
6. Professional service (max of 18 hours in a 3 year period; 30 five year period)
7. Leadership experiences
8. Opportunities to enhance knowledge & understanding of diverse educational settings
9. Preapproved travel or work experience

**Hours Approved: \_\_\_\_\_\_\_\_\_\_ Date Approved: \_\_\_\_\_\_\_\_\_**

**Committee Member Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Committee Chair Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**