



Professional Development Form

Teacher Directed

Employee Name: _____

Building Location: _____

My work day begins: _____ and ends: _____

Date	Start Time	End Time	Total Hours	DESCRIPTION OF ACTIVITY

MVEA staff will receive 7.5 hours (full day) of *teacher directed* Professional Development time, regardless of FTE to support professional development, which is chosen at the employee's discretion, or to work on the non-student day between the first and second semester.

The professional development must be relevant to the employee's assignment, renewal of certification, pursuit of an additional degree or certification to a possible future assignment of the employee and not already paid for by the District.

1. It is your responsibility to submit this form **directly** to Jenilee Springer, Payroll & Benefit Specialist via email, in-person or by printing and sending through the inter-district mail. Signature not required by Administrator.
2. Activities must be performed **outside** of your contracted work day
3. Completed Forms **must total 7.5 Teacher Directed Hours (regardless of FTE)** in order to receive payment. Partial payments will not be processed.
4. Forms received by the **5th business** day of the month will have payment issued that month

Deadline to Submit:

Completed forms must be submitted to the Business Office by the 5th business day in August

I certify the above is an accurate record of the time worked during this period:

Employee Signature / Digital Signature

Date

Payroll Use Only

Account Code: _____

Hours 7.5 X Hourly Rate \$ _____ = \$ _____

Date Paid _____

Total Payment