HILLSBORO CITY SCHOOLS
INDIVIDUAL PROFESSIONAL DEVELOPMENT PLAN

Name:	Submission Date:
Assignment:	
Area of License:	License #
Effective Date of License	Expiration Date of License
Plan Type: ___1st 5 year license	_____2nd renewal ____3rd + renewal
Goals: List 2-3 goals for your professional development over the next five (5) years. Within each goal, indicate two Ohio Educator Standards each goal.	
Sample Goal: I will increase my knowledge of strategies to increase students learning in order to improve classroom discipline, by attending college courses and collaboration with my colleagues. **Educator Standards: Use the Appendix 5 Rubric to find the Educator Standards (located on the LPDC site)** **Standard 1.3.** I will expect that all students will achieve to their full potential. **Standard 5. 5.** I will maintain an environment that is conducive to learning for all students.	
Goal 1 **Educator Standards:** Teacher Standard: Teacher Standard:	
Goal 2 **Educator Standards:** Teacher Standard: Teacher Standard:	
Goal 3 **Educator Standards:** Teacher Standard: Teacher Standard:	
Teacher Signature	Date:
LPDC Chair's signature:	Date
This date is the approval date in which the certificated staff can use to start collecting contact hours toward their next renewal.	

Implemented 1/17/13