TEACHER’S REQUEST

FOR RELICENSURE POINTS

(Must be submitted prior to activity.)

SCHOOL/DEPARTMENT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Teacher’s Name* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *PID #*

# Current Teaching

*Assignment* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Option: \_\_\_\_\_\_\_\_\_Points Requested: \_\_\_\_\_\_\_\_\_\_\_\_

(Check Renewal Manual to calculate this.)

Beginning Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ending Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACTIVITY (Please provide description, brochure or other appropriate documentation):

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Approval of Principal/Supervisor:

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

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\_\_\_\_\_ **Proposal Approved** for \_\_\_\_\_\_\_\_\_\_\_\_\_ Relicensure Points.

\_\_\_\_\_ **Proposal Denied** for the following reason(s):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Personnel Administrator Date

1/03