

# 2021-2022 PL Plan Alternative Training Form

for Required Principal-Discretion Professional Learning **Day 4** or **Day 5**

Principals should use this form to approve acceptable substitutions to your school's Professional Learning Plan for (PL) Days #4 and/or 5 only. Teachers may substitute a maximum of 12 hours of PL per year. **This substitution form can only replace Day #4 or #5. All inquiries into Board-Required Days 1 -3 on July 28, July 29, and November 1 must be submitted and approved by the Professional Growth Supervisor.**

- There is a maximum of three hours on a calendared, instructional work day or maximum of six hours on a non-calendared, non-paid instructional day.
- **Principal approval of all trainings is required before starting any PL substituted from your school's PL Plan!**
- All online platforms/virtual conferences must be approved by the *Supervisor of Professional Growth* prior to completing any online training. In addition to viewing the webinar from the approved PL platform or attending a virtual PL conference, a reflective response must be completed and submitted following instructions on the reflective response form.

After the event, submit a copy of this form to the Teacher Center along with participation documentation. Keep the original form and original documentation for your records.

Teacher Name \_\_\_\_\_ School \_\_\_\_\_

This Substitution is approved for \_\_\_\_\_ teachers only.

Session Title \_\_\_\_\_

Session Date \_\_\_\_\_ Start Time \_\_\_\_\_ End Time \_\_\_\_\_

Location \_\_\_\_\_

Presenter(s) or sponsoring group \_\_\_\_\_

Activity Description \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of hours for substitute credit granted by principal.

1            2            3            4            5            6            Other \_\_\_\_\_

I approve this PL training to substitute for (circle one) Day #4 or Day #5 indicated in my school's PL plan which occurred on \_\_\_\_\_  
Date

\_\_\_\_\_  
(Principal's Signature Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Teacher's Signature Required)

\_\_\_\_\_  
Date