



North Idaho College
Prior Approval and Documentation for Professional Development Units

Name: _____ Extension: _____

Please list only one activity per form

(For use by Division Chair)

(State use only)

	Check One	Hours/ Credits Requested	Hours/Credits Awarded	PDU's for Salary	PDU's for Voc Certification
College Credit					
Paid Field Work or Clinical Experience			/80		
Conferences, Workshops & Seminars			/40		
Domestic or Foreign Travel			/120		
Independent Research and Activities Related to Teaching			/60		

Description of Activity:

Anticipated Completion Date: _____

Applicant's Signature: _____	Date: _____
Division Chair Approval: _____	Date: _____
Dean's Approval: _____	Date: _____

Upon completion of course or activity, attach documentation for evaluation of PDU's and return to your Division Chair.

Division Chair Approval Signature: _____ Date: _____

Final Approval (To be completed by Vice President for Instruction)		
PDU's awarded for Salary: _____	Awarded by: _____	Date: _____

Vocational Certification	
PDU's reviewed by SDVE for Vocational Certification: _____	Date: _____