

Relicensure Clock Hour Approval Application Form - Independent School District #709

Submit this form with **EACH** experience on a **YEARLY** basis to Duluth Public Schools Human Resources Department.

State File Folder Number _____

License Areas _____ Tier _____

Name _____

Home Address _____

E-Mail Address _____

MDE Date of Action _____

Expiration Year _____

Today's Date ____/____/____

Home School _____

Work Phone _____

Home Phone _____

☐ **Requesting Teaching/Related Service Hours**

Activity Date _____ Number of Clock Hours Requested _____

☐ **Requesting Administrative Hours**

Approved By Committee _____

Title of Experience _____

Components Requested As Per This Activity

- ☐ Positive Behavioral Intervention Strategies
- ☐ Reading Preparation
- ☐ Accommodations/Modifications/Adaptations
- ☐ Key Warning Signs Mental Illness
- ☐ Suicide Prevention
- ☐ English Language Learners
- ☐ Cultural Competency
- ☐ American Indian History & Culture

If you are requesting a component that was not granted on the CEU you must include a written description of the experience and how it met the component

Components Approved By Committee

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Category – (Check One Box Only)

- A** ☐ **Relevant Coursework** - College Course(s)
Attach a copy of transcript or grade slip.
1 Semester Credit = 24 Clock Hours
(Max of 124 Clock Hours)
- B** ☐ **Educational Workshops – Appropriate To Licenses**
Conferences, Institutes, Seminars, Lectures
Hour for Hour - Attach certificate of attendance.
- C** ☐ **Staff Development** – In-service Courses
(Approved By Teacher Development Committee)
Hour for Hour - Attach certificate of attendance.
- D** ☐ **Curriculum Development**
Site, District, Regional, State, National
Hour for Hour - Hours must be verified by a governing body.
Attach signed verification of participation.
PLC hours as determined by site administrator
(Maximum 30 hours of PLC per renewal)
- E** ☐ **Peer Coaching / Mentorship (Max. 30 clock hours per renewal)**
Engagement in formal peer coaching or mentorship relationships with colleagues.
Hour for Hour
Signature of supervisor verifying the experience and certificate.
- E1** PLC Facilitator (Max 30 clock hours per renewal)
- F** ☐ **Professional Service (Circle One)**
(F1 Max of 30 Clock Hours)
- F1** Supervision of Clinical Experiences
Student Teacher; Semester = 24 Clock Hours
Supervision of Pre-Service Teacher = Hour for Hour
Attach documentation with student's name, institution and principal's signature.
- F2** Participation on National, State, and Local Committees Involved With Licensure, Teacher Education, Or Professional Standards
Hour for Hour - Attach certificate of participation.
- F3** Participation in National, Regional or State Accreditation.
Hour for Hour - Attach certificate of participation.

- G** ☐ **Leadership Experiences (Circle One) (Max of 30 Clock Hours)**
- G1** Preapproved development of new or broader skills and sensitivities to the school, community, or profession.
Hour for Hour - Signature of supervisor verifying the experience and written statement of service contribution and professional growth.
- G2** Publication of articles in a professional journal.
Hour for Hour - Attach copy of the article and hours spent in research and writing.
- G3** Preapproved volunteer work in professional organizations related to licensure area.
Hour for Hour - Signature of supervisor verifying the experience and written statement of service contribution and professional growth.
- G4** Continuous Improvement Plan Committee Members
(Maximum. 30 hours per renewal – CIT, DWCIT, SLT)
- H** ☐ **Diversity Experiences (Circle One) (Max of 30 Clock Hours)**
- H1** Experiences with students of another age, ability, culture, or socioeconomic level.
Hour for Hour - Signature of supervisor verifying the experience and written statement of service contribution and professional growth.
- H2** Systematic, purposeful observation during visits to schools and to related business and industry.
Hour for Hour - Signature of supervisor verifying the experience and written statement of service contribution and professional growth.
- I** ☐ **Travel - Work Experience (Circle One)**
(Max of 30 Clock Hours)
- I1** Preapproved travel for purposes of improving instructional capabilities related to the field of licensure.
1 Week = Up To 10 Clock Hours
- I2** Preapproved work experience in business or industry appropriate to the field of licensure.
1 Week = Up To 10 Clock Hours
- ☐ **National Board Certification Verification**
Attach Certification Card
- ☐ **Local Option Exemption**

Chairperson Signature _____

Date _____

Entered at Minnesota Department of Education _____

Date _____