

Application for Professional Development Certificate

Name: _____ Title: _____
Address: _____
Phone: _____
Email: _____

Do you wish to have a letter of recognition sent to your employer? _____
If yes, please enclosed a stamped envelope addressed to your employer.

Summary of contact hours for the past year:

Category I: _____ (2 minimum - 6 maximum)
Category II: _____ (2 minimum - 6 maximum)
Category III: _____ (2 minimum - 6 maximum)
Category IV: _____ (2 minimum - 6 maximum)
Category V: _____ (0 minimum - 4 maximum)
Category VI: _____ (0 minimum - 4 maximum)
Total _____ (20 minimum)

To the best of my knowledge the information contained in this application is accurate and complete.

(Signature of Applicant)

(Date)

I have examined this application and authorize the issuance of a Professional Development Certificate.

Professional Development Program Chairperson

(Date)

Category V. Other certification/training.

Activity	Provider	Date	Hours
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Total Hours (0 minimum - 4 maximum)			_____
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Category VI. Professional service. Holding an elected office is credited three hours; a committee chair is credited two hours; and actively serving on a committee is credited one hour.

Office/Committee Dates Served Hours

Office	Committee	Dates Served	Hours
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Total Hours (0 minimum - 4 maximum)			_____
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Narration: (Required)

Choose one session or program you attended and give a detailed description of how you applied the new information learned to your job.

Independent Study: (optional)

A special project, or learning situation on your own, like in-depth research, reading, etc in which you have sought to learn a new skill, or new information, as opposed to a course/session offered by an organization, college, agency, may qualify for 1 hour of credit in Categories I through V.

It is hoped that throughout one's career this professional growth and recognition is on going.

Certificates are given annually

Members completing five years of professional development will receive a pin.

Ten-year participants are recognized with a plaque.

It is hoped that throughout one's career this professional growth and recognition is ongoing.

Certificates are given annually.

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Ten-year participants are recognized with a plaque.

Return by December 31st to:

Katie Struss, Buena Vista County Conservation Board 377 440th St, Peterson IA 51047

Work: 712-295-7985 Email: naturalist@bvcountyparks.com