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# SEEC/CREA/NESC/WERC/NCEC

## Workshop Verification Hours

**You will need to complete one table on this verification form for every professional development activity you attend if you are working toward a total of 15 workshop hours to receive one graduate credit. Additional pages can be used if needed.**

When you have attended a total of 15 professional development hours and have verification forms completed for those hours, register for the credit from VCSU [www.vcsu.edu/extend](http://www.vcsu.edu/extend), click on **Registration and Course Availability** button. Select the **EDUC 2000 ST: Professional Development (SEEC/CREA/NESC/WERC/NCEC)** course/s.

### Return all verification forms to:

Dave Bass

VCSU School of Education

101 College Street

Valley City, ND 58072

### Check the appropriate box:

[ ]  I have registered for the EDUC 2000 Course

[ ]  I have paid for the class

[ ]  My administrator has signed the form

***Please make copies of your verification forms for your own documentation.***

### Enter your contact information:

| Name:  |       | email: |       |
| --- | --- | --- | --- |
| school: |       | phone: |       |
| District: |       | REA: |       |
| Administrative Supervisor Signature: |       |

### Enter your PD Activities:

| **P.D. Activity Title:** |       |
| --- | --- |
| **Total Hours:** |       | **Date:** |       |
| How will this PD Activity help you improve your teaching? |
|       |
| How will this PD Activity promote increases in student achievement? |
|       |

| **P.D. Activity Title:** |       |
| --- | --- |
| **Total Hours:** |       | **Date:** |       |
| How will this PD Activity help you improve your teaching? |
|       |
| How will this PD Activity promote increases in student achievement? |
|       |

| **P.D. Activity Title:** |       |
| --- | --- |
| **Total Hours:** |       | **Date:** |       |
| How will this PD Activity help you improve your teaching? |
|       |
| How will this PD Activity promote increases in student achievement? |
|       |

| **P.D. Activity Title:** |       |
| --- | --- |
| **Total Hours:** |       | **Date:** |       |
| How will this PD Activity help you improve your teaching? |
|       |
| How will this PD Activity promote increases in student achievement? |
|       |

| **P.D. Activity Title:** |       |
| --- | --- |
| **Total Hours:** |       | **Date:** |       |
| How will this PD Activity help you improve your teaching? |
|       |
| How will this PD Activity promote increases in student achievement? |
|       |

| **P.D. Activity Title:** |       |
| --- | --- |
| **Total Hours:** |       | **Date:** |       |
| How will this PD Activity help you improve your teaching? |
|       |
| How will this PD Activity promote increases in student achievement? |
|       |