

**Clear Education Specialist Credential
Professional Development Menu of Options
and Approval Form**

Name: _____

Sponsoring Agency of Proposed Activity: _____

Title of Activity: _____

Date(s): _____

Time(s): _____

Location: _____

Name(s) of Presenters: _____

Number of Hours for Participation: _____

Approved by (University Supervisor Signature): _____

Professional Development Menu of Options:

Options include, but are not limited to the checklist below. Approved Professional Development options may include: coursework in advanced specialty specific areas, additional authorizations, opportunities for leadership or professional advancement, professional development, etc.

Course(s) – Please list course number, title, and university
(e.g., SPED 243 Applications of Research Methods in Special Education, CSU Fresno)

Conference

District-provided Professional Development/Inservice Training

Webinar

Online Training Module (e.g., IRIS Center)

Independent Study

Other _____

Note: Attach each proposal for professional development activity to your Individualized Induction Plan. Be sure to ask your university supervisor or district support provider for approval of any professional development activity.

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Written Requirements

- a. A bulleted list of key learning points/activities: Provide an overview of your project, assignment, or activity. Provide enough detail so that someone reading this overview could understand what you have accomplished to fulfill the requirements of professional development.

- b. Application to current or future Education Specialist position: Write a summary about how the information you learned through participating in this project, assignment, or activity has been (or could be) implemented into your practices as a special education teacher in your school, district, county, etc.