

**PENN CAMBRIA SCHOOL DISTRICT
ACT 48 REQUEST FORM (Revised April 2016)**

INSTRUCTIONS: Professional educators should use this form to request that appropriate Act 48 hours completed outside the district and not reported by the agency granting the hours, be reported by Penn Cambria School District to the PA Department of Education. Complete this form; attach documentation, programs, workshop descriptions, and any other information that will support the request. Employees secure supervisor pre-approval and take all copies to workshop for verification by presenter or coordinating agency representative. Be prepared to share information, materials, and knowledge acquired with administration and colleagues as requested.

Name: _____ Workshop Date: ___/___/_____

Workshop/Session Title: _____

Name of Facilitator or Source: _____

Workshop Time (Start and End): _____ Act 48 Hour Value: _____

Workshop Location: _____

Employee Signature: _____

Presenter/Coordinating Agency Representative's Verification.
Obtain signature **OR** attach certificate /documentation of completion

Date of Workshop

Presenter's Signature

Items to Include or Attach for Approval:

_____ Detailed description of specific activity/workshop session (include objectives or learning outcomes).

_____ Written summary of how the information from this professional development session can be implemented in your classroom or current assignment. What did you gain that was valuable as an educator from this session? Are there ideas/strategies that should be shared with others?

RETURN THIS FORM TO: Administrative Office (ATTN: Mrs. Jeanette Black)

Supervisor's Approval: APPROVED _____ DISAPPROVED _____

Act 48 Category and Subcategory: _____

Supervisor's Signature: _____