

# MLC CLOCK HOUR APPROVAL FORM

<b>FULL NAME</b>			
<b>STREET ADDRESS</b>			
<b>CITY, STATE, ZIP</b>			
<b>EMAIL</b>		<b>PHONE</b>	
<b><u>MDE FILE FOLDER NO.</u></b>			
<b><u>LICENSE/S HELD</u></b>			
<b><u>LICENSE/S EXPIRATION DATE</u></b>			

<b>REQUEST FOR</b>	<input type="checkbox"/> Pre-approval of clock hours subject to actual completion <input type="checkbox"/> Final approval of clock hours for professional activity completed.		
<b>ACTIVITY CATEGORY</b>	i.e. relevant coursework, educational workshops, conferences, etc.		
<b>CLOCK HOURS REQUESTED</b>	24 clock hours per credit passed		1 credit = 24 clock hours

**This activity addresses the following:** *(You may check more than one)*

- ☐ Positive Behavioral Intervention Strategies
- ☐ Accommodation, Modification, and Adaptation of Curriculum, Materials and Instruction
- ☐ Key Warning Signs for Early-Onset Mental Illness in Children and Adolescents
- ☐ Reading Preparation
- ☐ Technology
- ☐ English Language Learners
- ☐ Selective Statement of Professional Accomplishment and Assessment of Professional Growth

**Description of this experience:** *(Include objective, amount of time engaged and an evaluation of the experience. Attach additional pages for documentation, explanation and detail as appropriate.)*

My typed/written signature is verification that the above information is true to the best of my knowledge.		Current Date	
--	--	--------------	--

**MAIL TO:** Merry Northenscold, New Ulm Public School District #88, 400 S. Payne Street, New Ulm, MN 56073    **OR**  
**EMAIL TO:** Merry Northenscold at mnorthenscold@newulm.k12.mn.us

## LOCAL COMMITTEE ACTION ONLY

<input type="checkbox"/> APPROVED for <input type="text"/> Clock Hours <input type="checkbox"/> Clock Hours NOT APPROVED			
Reason if not approved			
Committee Signature & Date <i>(typed or written)</i>		DATE	