

# BLOOM-CARROLL LOCAL SCHOOL DISTRICT

## EMPLOYEE PROFILE & INDIVIDUAL PROFESSIONAL DEVELOPMENT PLAN

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Building: \_\_\_\_\_

This IPDP is the Original \_\_\_\_\_ Revised \_\_\_\_\_ [please check one]

YEAR 1 \_\_\_\_\_ YEAR 2 \_\_\_\_\_ YEAR 3 \_\_\_\_\_ YEAR 4 \_\_\_\_\_ YEAR 5 \_\_\_\_\_ [please check one]

➤ List all certificates/licenses held: Check the license under which you currently work.

License/Certificate Title	Type [5yr./8yr.Perm]	Date of Expiration	✓

Identify three State Professional Standards [teacher, admin, etc.] that match your goals:

Standard #	Description of Standard

State your Action Plan/Activities and their respective timeline for each standard:

Standard #	Action Plan/Activities/Timeline

I certify that the above IPDP is in effect as of the date below.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_