

Ohio Valley Education Service Center

Individual Professional Development Plan

Name:	Submission Date:
Building/Assignment:	
Type of Certificate/License:	
Area of Licensure:	
Issue Date:	Effective Date:
	Expiration Date:
Plan Type Select one: <input type="checkbox"/> Initial Proposal <input type="checkbox"/> Revised Proposal <input type="checkbox"/> Amended Proposal	
IPDP Effective Date: <i>From</i> _____ <i>to</i> _____	
Renewal Cycle Select one: <input type="checkbox"/> Transitioning from certificate to license <input type="checkbox"/> 1st renewal of 5-year license <input type="checkbox"/> 2nd renewal of 5-year license <input type="checkbox"/> 3rd+ renewal of 5-year license	
Goals List 3-5 goals for your professional development learning. Within each goal, include three distinct aspects: (1) intention to engage in learning; (2) focus for learning; and (3) rationale for & application of learning. <i>(See sample below)</i>	
Sample Goal: <i>I will increase my knowledge of strategies to manage groups of students in order to improve classroom discipline by attending workshops and networking with colleagues.</i>	
Goal 1 	
Goal 2 	
Goal 3 	



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Additional goals (if applicable):

I will attend and participate in any and all activities as directed by the Ohio Valley ESC and/or my district of placement.

Educator Signature _____ Date _____

DO NOT MARK BELOW THIS LINE. FOR LPDC USE ONLY.

☐ **Revise/Resubmit**

Revision Advice:

-OR-

☐ **Approved as written**

Approval Signature _____ Date _____

