

East Williston UFSD Professional Development Steering Group  
**FORM FOR PRIOR APPROVAL / COMPLETION CERTIFICATE**  
Category 4, 5, 8, 9, 10 & 12  
(To be submitted to PDSG)

Name \_\_\_\_\_ School \_\_\_\_\_

Activity Category: (See reverse side): \_\_\_\_\_

Title of Activity: \_\_\_\_\_

\_\_\_\_\_

Total Number of Hours To Be Earned \_\_\_\_\_

(Please consult your information booklet for relevant caps.)

Brief Description of the Proposed Activity/Goals/Proposed End Product:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

**Please attach to this certificate all required information and documentation as specified in the information booklet.**

(Such as transcripts, logs, workshop data, etc.)

Prior Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
(Administrator, Curriculum Associate or PDSG)

Participant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Final Certification

Approval by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Administrator, Curriculum Associate or PDSG)