



# Clock Hours for Re-licensure

St. Michael/Albertville Schools

*"Excellence is Our Tradition"*

Name: \_\_\_\_\_

File Folder #: \_\_\_\_\_

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

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

## Mandatory Learning Area Requirements:

### CEU categories

- |                               |  |
|-------------------------------|--|
| A. Relevant Course work       | F. Professional Service                |
| B. Educational Workshops etc. | G. Leadership Experiences              |
| C. Staff Development          | H. Diverse Education Experiences       |
| D. Curriculum Development     | I. Pre-Approved Travel/Work Experience |
| E. Peer Mentoring             | J. Reflective Statement                |

### **STMA Continuing Education Committee requires 1 hour in each area.**

*Attach copies of your certificates / proofs of clock hours in the same order that you list them below.*

**This is required.**

Category of Continuing Education (A. – J.)	Title/Name of Activity	Date of Experience	Description of Experience	# of Clock Hours
<b>1. Positive Behavioral Interventions</b>				
			<b>Total:</b>	

Category of Continuing Education (A. – J.)	Title/Name of Activity	Date of Experience	Description of Experience	# of Clock Hours
<b>2. Scientifically-Based Reading Strategies</b>				
			<b>Total:</b>	

Category of Continuing Education (A. – J.)	Title/Name of Activity	Date of Experience	Description of Experience	# of Clock Hours
<b>3. Accommodation, modification or adaptation of curriculum, instruction, materials for students with special needs as they work toward achieving graduation standards</b>				
			<b>Total:</b>	

<b>Category of Continuing Education (A. – J.)</b>	<b>Title/Name of Activity</b>	<b>Date of Experience</b>	<b>Description of Experience</b>	<b># of Clock Hours</b>
<b>4. Understanding Key Warning Signs of Mental Health Problems in Students</b>				
				<b>Total:</b>

<b>Category of Continuing Education (A. – J.)</b>	<b>Title/Name of Activity</b>	<b>Date of Experience</b>	<b>Description of Experience</b>	<b># of Clock Hours</b>
<b>5. Integrating technology into classroom instruction to improve engagement and achievement</b>				
				<b>Total:</b>

<b>Category of Continuing Education (A. – J.)</b>	<b>Title/Name of Activity</b>	<b>Date of Experience</b>	<b>Description of Experience</b>	<b># of Clock Hours</b>
<b>6. Suicide Prevention Best Practices</b>				
				<b>Total:</b>

<b>Category of Continuing Education (A. – J.)</b>	<b>Title/Name of Activity</b>	<b>Date of Experience</b>	<b>Description of Experience</b>	<b># of Clock Hours</b>
<b>7. Cultural Competency</b>				
				<b>Total:</b>

