

MIB/ISD712 Clock Hour Approval Application Form

This form is to be submitted with each request for clock hours to the local continuing education committee according to the rules established by the local committee. Please review the requirements for Renewal of Professional Licenses at <https://www.revisor.mn.gov/rules/?id=8710.7200>

Name:	
File Folder Number:	Expiration Date:
Applicant Signature:	Date:

Request for:

- Pre Approval of clock hours subject to completion.
- Final approval of clock hours for professional activity completed.

Category (Please write how many hours from each category, must have 2 categories in your 125 hrs)

- _____ A. relevant coursework completed at accredited colleges and universities
 - _____ B. educational workshops, conferences, institutes, seminars, or lectures in areas appropriate to licenses held
 - _____ C. staff development activities, inservice meetings, and courses
 - _____ D. site, district, regional, state, national, or international curriculum development
 - _____ E. engagement in formal peer coaching or mentorship relationships with colleagues that addresses one or more of the standards in part [8710.2000](#)
 - _____ F. professional service in the following areas: (1) supervision of clinical experiences of persons enrolled in teacher preparation programs; (2) participation on national, state, and local committees involved with licensure, teacher education, or professional standards; or (3) participation in national, regional, or state accreditation
 - _____ G. leadership experiences in the following areas: (1) development of new or broader skills and sensitivities to the school, community, or profession; (2) publication of professional articles in a professional journal in an appropriate field; or (3) volunteer work in professional organizations related to the areas of licensure held
 - _____ H. opportunities to enhance knowledge and understanding of diverse educational settings in the following areas: (1) experiences with students of another age, ability, culture, or socioeconomic level; or (2) systematic, purposeful observation during visits to schools and to related business and industry
 - _____ I. preapproved travel or work experience: (1) travel for purposes of improving instructional capabilities related to the field of licensure; or (2) work experience in business or industry appropriate to the field of licensure
- _____ **Total number of hours requested**

This activity addresses:

Positive Behavior Modifications	Mental Illness Training
Further Reading Preparation	Suicide Prevention
English Language Learners	Cultural Competency

Local Committee Action	
<input type="checkbox"/> Approved, Number of Clock Hours:	<input type="checkbox"/> Not Approved, Reason:
Committee Signature:	Date: