**Meigs Local School District**
**Contact Hours/CEU Application Form & Log**

**Form B**

Name: _____Building Assignment_____
Certificates you hold: _____IPDP Approval Date_____

| Name of Activity/Option | Presenter/ Organization | Date(s) of Attendance | Goal # met | Description of Activities: | Contact Hours/ CEU/s |
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| **Please submit 4 copies of all forms & documents**<br>**Total Contact Hours/CEU's for Approval:**<br>*(Original documents, letter of attendance, signatures, certificates, etc. must accompany this form for final approval)* | | | | | |

Approved ☐ Revision Requested ☐ Denied ☐
Reason: _____
_____

Other Comments: _____

**LPDC Chairperson: _____Date_____**