DIOCESE OF WILMINGTON
Office for Catholic Schools

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DIOCESAN WAIVER
PROFESSIONAL DEVELOPMENT CLOCK HOUR FORM
JULY 1, ____ THROUGH June 30, ____

List all professional development activity below and attach, in the order listed, a copy of the documentation (certificate, letter, transcript) for each entry. Prior to signing your Employment Agreement for the next school year, submit a copy of this form and attached documentation to your school principal.

CLOCK HOURS	TITLE OF PROFESSIONAL DEVELOPMENT	DATE COMPLETED
TOTAL HOURS		

Name (printed) _____ School: _____

Signature: _____ Date: _____