

## FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT

### PROFESSIONAL GROWTH AWARD APPLICATION FORM

To be completed by the worker and submitted to Professional Growth Review Panel upon completion of requirements (see attached "Guidelines for Professional Growth Award"). Please review the attached CHECKLIST and make sure you have included all necessary paperwork when submitting your application packet for review.

Name \_\_\_\_\_ Last Four Digits of SSN \_\_\_\_\_

Position \_\_\_\_\_ Campus \_\_\_\_\_ Department \_\_\_\_\_

Date of Hire \_\_\_\_\_ Office Phone No. \_\_\_\_\_

1. College, adult education, or trade school courses (See No.1 on Guidelines sheet for explanation, (Minimum of 48 hours required/NO MAXIMUM)

Institution-Qtr/Sem Date	Course Number & Course Title	Specify Qtr or Semester Units	No. of Hours
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Use separate sheet if needed

TOTAL \_\_\_\_\_

2. District In-Service Workshop (See No. 2 on Guidelines sheet, 25 HOUR MAXIMUM)

District In-Service Workshop	Date of Workshop	No. of Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Use separate sheet if needed

TOTAL \_\_\_\_\_  
(25 Hour Maximum)

3. Leadership or Committee Work (See No. 3 on Guidelines sheet, 50 HOUR MAXIMUM)

Professional Organization	Date of Activity	No. of Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____

Non-Professional Organization (10 HOUR MAXIMUM)

Use separate sheet if needed TOTAL \_\_\_\_\_  
(50 Hour Maximum)

4. District Committee Work (50 HOUR MAXIMUM. District committee work - use Committee Work Verification Form)

Professional Organization	Dates of Committee Work	No. of Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____

Use separate sheet if needed TOTAL \_\_\_\_\_  
(50 Hour Maximum)

5. Job Related Special Activities (see No. 5 on Guidelines sheet. NO MAXIMUM, Ineligible for Carryover)

Job Related Special Activities	Date of Activity	No. of Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____

Use separate sheet if needed TOTAL \_\_\_\_\_

6. Physical Fitness Activities (see No. 6 on Guidelines sheet, 36 HOUR MAXIMUM)

Institution-Qtr/Sem Date	Course Number & Course Title	Specify Qtr or Semester Units	No. of Hours
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Use separate sheet if needed TOTAL \_\_\_\_\_  
(36 Hour Maximum)

NOTE: PLEASE MAKE A COPY FOR YOUR FILE BEFORE SUBMITTING

Effective May 2008

(previous forms may NOT be used)

## GUIDELINES FOR PROFESSIONAL GROWTH AWARD

A worker must have completed at least one year of employment with the District and have achieved permanent status. Course work started prior to employment will not be considered for an award.

An eligible worker must complete a minimum of two hundred (200) hours of credited activity, One hundred (100) hours of which must have been completed since the last award. One hundred (100) of the two hundred (200) hours may be hours completed prior to the last award which was earned in Category 1 of Requirements, completion of college, adult education, or trade school courses.

A minimum of two years in paid status must have occurred since the last award.

An application for an award must be accompanied by OFFICIAL transcripts or official letterhead that verify specific dates and hours of attendance.

The worker must complete a diversity of activities. The hours may be earned through any combination of the following:

1. COLLEGE, ADULT EDUCATION, OR TRADE SCHOOL COURSES. Each course must be approved and evidence of successful completion (grade of "C" or better, or Pass from a Pass/Fail basis) filed with the Review Panel. A minimum of forty-eight (48) hours must be completed in this category. There is NO MAXIMUM. Calculation of hours for courses which are assigned a certain number of units will be based on the following:

Foothill and De Anza

No. of contact hours/week as stated

In the Course Inventory Audit Report

Other Colleges

a. One Quarter unit = 12 hours

b. One semester unit = 18 hours

2. DISTRICT IN-SERVICE WORKSHOPS. Attendance and participation in voluntary District in-service workshops related to the work of the district. Maximum of twenty-five (25) hours per award.
3. LEADERSHIP OR COMMITTEE WORK. Participation in a leadership role or in committee work in local, state, or national professional associations to the extent of the guidelines approved by the Review Panel. Maximum of fifty (50) hours per award. Participation in a leadership role or in committee work in a non-professional association to the extent of the guidelines approved by the Review Panel. Maximum of ten (10) hours per award.
4. DISTRICT COMMITTEE WORK. Participation in District committee work to the extent of the guidelines approved by the Review Panel. Maximum of fifty (50) hours per award.
5. JOB RELATED SPECIAL ACTIVITIES. Participation in job related special activities, such as seminars, conferences, conventions, institutes, and lectures offered by colleges, adult schools, professional associations and community organizations. NO MAXIMUM.

6. **PHYSICAL EDUCATION ACTIVITIES.** A maximum of thirty-six (36) hours for Physical Education credits per award. The exception to this limit is if the Physical Education credits are work related.

No more than one award (or 200 hours) may be earned for activities during a staff development leave. There will be no carryover of excess hours earned during a staff development leave. It will be the responsibility of the worker to report all hours earned during a leave; if not reported, staff development leave hours will be withheld.

These guidelines apply to all applications filed with the Professional Growth Review Panel.

**FOOTHILL - DE ANZA COMMUNITY COLLEGE DISTRICT**  
**PROFESSIONAL GROWTH AWARD VERIFICATION CHECKLIST**  
**Verification Checklist**

Name: \_\_\_\_\_ Ext. \_\_\_\_\_

Job Title: \_\_\_\_\_ Campus: \_\_\_\_\_

1. ☐ Official transcript for academic courses.

2. ☐ Workshop, conference, or outside committee work.

A. Official letterhead \_\_\_\_\_

B. Authorized signature \_\_\_\_\_

3. ☐ Professional Growth Verification form for District committee work.

Authorized signature \_\_\_\_\_

Note: Omissions may delay your award.

FOOTHILL – DE ANZA COMMUNITY COLLEGE DISTRICT

PROFESSIONAL GROWTH AWARD  
Committee Work Verification Form

\_\_\_\_\_ participated on the \_\_\_\_\_  
(Name)  
\_\_\_\_\_ Committee on the following dates and times:

Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____
Date: _____	Time: _____	No. of Hours: _____

Total No. of Hours: \_\_\_\_\_

I verify participation on the \_\_\_\_\_ Committee by  
\_\_\_\_\_ on the dates  
and times recorded.

Date: \_\_\_\_\_ Signature of Committee Chairperson: \_\_\_\_\_

Effective January 1997  
(previous forms may NOT be used)

**FOOTHILL - DE ANZA COMMUNITY COLLEGE DISTRICT**

**PROFESSIONAL GROWTH AWARD  
Validation Of Attendance**

This is verification that (Name) \_\_\_\_\_

attended a Seminar/Workshop on \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_ Place \_\_\_\_\_

The seminar/workshop was presented by \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

from \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m.

Total hours \_\_\_\_\_

\_\_\_\_\_  
Signature of Certifying Official

\_\_\_\_\_  
Title

Effective January 1997  
(previous forms may NOT be used)