San Diego Community College District
Classified Professionals
Proposal of Professional Development Activities

Last name, First name:		Employee ID:	
Classification:		Supervisor/Manager:	
Department:		Campus:	
Email:		Date:	

Classified Professionals Bargaining Unit Agreement

ARTICLE XV- PROFESSIONAL GROWTH

15.2.1- Educational Incentive Program

¶ 2 - Professional Development activities (e.g.: conferences, workshops, certificates, scholarly & creative works) may also be submitted for salary advancement.
These activities must be completed on the unit member's own time.

¶ 3- Thirty (30) hours of conferences/workshops/seminars/classes (outside of the SDCCD) or required time spent gaining a certificate equals one (1) semester unit. Fifteen (15) hours as a presenter at a conference/workshop/seminar equals one (1) semester unit. A proposal of hours to be completed must first be approved by the supervisor and then shall be submitted to AFT prior to the commencement of the activity. Upon completion, an accounting of all hours completed will be submitted to AFT and AFT shall make a determination on the appropriate number of hours to be granted. The maximum number of hours allowed for any one particular conference may not exceed the total number of hours for which the conference was scheduled. Proof of conference registration and a full copy of the conference schedule shall also be required to be submitted for approval.

Directions:

1. Complete the above section above
2. Complete type of professional development activity
3. Submit to your supervisor/manager whom you report to for review
4. Proposal then must be sent to AFT
5. If proposal is approved,
    a. After completing the selected activity, you **must submit a completion form** to the AFT office with the following
        i. For conferences/workshops/certificates, attach proof of registration and full copy of schedule/itinerary
        ii. For scholarly & creative works, a copy of what has been completed

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1. Please select the type of Professional Development Activities for this proposal

☐ **Conferences**

Attach a copy of the proposed event flyer and/or registration with the indicated itinerary

Title	Date	Time	Total hours

☐ **Workshops**

Title, date and timeline of proposed workshop(s)

Title	Date	Time	Total hours

☐ **Certificates**

Attach a copy of the program information- name & time commitment towards the certificate

Title	Date	Time commitment towards certificate

☐ **Scholarly & Creative works**

Attach a copy of your proposed work, proposed time frame it will take

Item	Proposed timeline/date(s)	Time commitment towards Scholarly & Creative works

2. Employee's signature: _____

3. Proposal review process of the supervisor/manager: ☐ Approved ☐ Denied

Comments: _____

_____

Signature and date: _____

4. AFT review: _____

_____