**QUEEN CREEK UNIFIED SCHOOL DISTRICT**

**PROFESSIONAL DEVELOPMENT LOG**

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| **Employee Name** |  | Click here to enter text. |  | **Social Security Number** |  | Click here to enter text. |
|  |  |  |  |  |  |  |
| **Date** | **Program Title** | **Type** | **Clock Hours** | **Verification Provided** | **District Use** |
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|  |  | **Total Hours** | Click here to enter text. |  |  |

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| **Type of professional development:**1. **Courses related to education or a subject area taught in Arizona public schools**
2. **District in-service designed for professional growth**
3. **Professional (education related) conferences**
4. **Business internship**
5. **Educational research**
6. **Leadership position in an educational organization**
7. **Serving on a visiting accreditation team**
 |  | **I declare under the penalties of perjury that the information presented in this log has been examined by me and to the best of my knowledge represents a true and valid record of professional development hours completed during the last valid period of my certificate.****Signature Date** |