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NOBLE LOCAL SCHOOL DISTRICT LPDC  
INDIVIDUAL PROFESSIONAL DEVELOPMENT PLAN (IPDP) – 5 YEAR PLAN

Date Submitted: \_\_\_\_\_

Name: _____	Please check one: <input type="checkbox"/> Initial plan <input type="checkbox"/> Revision
Current Licenses: _____	Year License Expires: _____
_____	_____
_____	_____
_____	_____
Other endorsements: _____	
Current Assignment: _____	

**Professional Long Term Goals:** (See pages 22-23 in HQPD booklet for SMART goal tips.)

Goal #1 \_\_\_\_\_

Goal #2 \_\_\_\_\_

Goal # 3 \_\_\_\_\_

If you will be enrolled in a graduate degree program or a program leading to additional licensures during this renewal cycle please complete the following. If you have an outline of this degree or licensure please attach it to this form before turning it in.

College/University: \_\_\_\_\_

Graduate Degree Program or Licensure: \_\_\_\_\_

**LPDC Action:**

Approved \_\_\_\_\_ LPDC chairman signature Date \_\_\_\_\_

Returned for Revision \_\_\_\_\_ LPDC chairman signature Date \_\_\_\_\_

Reason: