

VERIFICATION CERTIFICATE FOR VIRGINIA LICENSE RENEWAL (FORM PD-1) COMPLETE ONE SHEET FOR EACH ACTIVITY

GENERAL INFORMATION		
Last Name	First Name	School/Site
Title of Activity		Date of Activity
RECERTIFICATION OPTION Op. 1 – College Credit (Max. 1 Op. 2 – Professional Conference Op. 3 – Curriculum Developme Op. 4 – Publication of Article (I Op. 5 – Publication of Book (M Op. 6 – Mentorship/Supervisio Op. 7 – Educational Project (M Op. 8 – Professional Developme	ce (Max. 45 Points) ent (Max. 90 Points) Max. 90 Points) Iax. 90 Points) n (Max. 90 Points)	Points Earned
Signature of Certificate Holder		Date
Signature of Administrator/Supervisor		Date
Signature of Director of Personnel		Date

Notification Statement: Each certificate holder is responsible for maintaining an accurate record for participation in his or her individualized recertification folder. Questions concerning recertification/license renewal should go to your Supervisor, Personnel Specialist, or the Director of Personnel.

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