

Appalachia Intermediate Unit 8

119 Park Street, Ebensburg, PA 15931

472-7690

Act 48 Quick Checklist

Forms for Act 48 are available from the following sources:

- ✓ Karen Makin, Project Assistant – 472-7690 ext. 325 (Park St. Office)
- ✓ IU 8 Web site – <http://www.apiu.k12.pa.us>
- ✓ IU 8 Offices – see building receptionist

If you are a participant:

| <u>Attending a conference</u> | <u>Attending a training in which IU 8 is not the provider</u> | <u>Attending a training in which IU 8 is the provider</u> |
|---|---|--|
| <ul style="list-style-type: none">✓ Complete the Administrative Meeting/ Conference Form and obtain board approval for attendance.✓ Complete the IU 8 Act 48 and/or In-service Form.✓ Obtain pre-approval from supervisor.✓ Verification of attendance (presenter/coordinating agency signature or certificate/documentation of attendance).✓ Obtain completion approval from supervisor. | <ul style="list-style-type: none">✓ Complete the IU 8 Act 48 and/or In-service Form✓ Obtain pre-approval from supervisor.✓ Obtain verification of attendance (presenter/ coordinating agency signature or certificate/ documentation of attendance).✓ Obtain final approval from supervisor. | <ul style="list-style-type: none">✓ Complete the IU 8 Act 48 and/or In-service Form.✓ Obtain pre-approval from supervisor.✓ Sign-in and sign-out at the session(s).✓ Complete paperwork provided at the session (Act 48 Data Form). |

(See Other Side)

If you are a presenter:

Internal (This designates that IU 8 is the provider of the service).

- ✓ Have participants complete Act 48 Data Form.
- ✓ Complete the Program Summary Sheet.
- ✓ Have participants sign in and sign out on the roster.
- ✓ Complete the Act 48 and/or In-service Form if you are to receive hours.

External (This designates that IU 8 is not the provider of the service.)

- ✓ Complete the Act 48 and/or In-service Form if you are to receive hours.

If you are taking a college/university course:

- ✓ Submit the course reimbursement form to your supervisor for pre-approval (pre-approval required prior to taking course).
- ✓ After taking the course, submit the course reimbursement form for completion approval from supervisor. Official transcript or grade report--receipt of payment or cancelled check must be attached. Supervisors will forward completed forms to the Project Assistant.

Appalachia Intermediate Unit 8
Act 48

Process for Intermediate Unit Associates Conducting External Trainings

All forms and materials are available on the IU 8 website, from Karen Makin, Park Street Office and the Receptionist at each IU 8 Office.

1. Use the appropriate registration process (a data base must be completed in Excel and the fields necessary will be sent to any office on disk upon request). Fields for the Excel file are as follows:

Title (Mr., Mrs., Ms., Dr., etc.)

First Name

Last Name

District

Address*

Town*

State*

Zip*

* Home information

2. All participants must use the appropriate sign in and sign out form (roster list).
3. All participants must fill out the appropriate data form.
4. The person responsible for the training must fill out a program summary sheet.
5. A disk copy and hard copy of the information should be forwarded to Karen Makin, Park Street Office, no later than five days after the training occurs. The Excel file may be emailed as an attachment to: kjm@iu08.apiu.k12.pa.us
6. Data will be entered from the Park Street Office and provider letters will be sent to all participants from the Park Street Office.

Summary: A total of 3 forms (sign in and out sheets, information form and summary form) and the Excel file must be completed and sent to Karen Makin.

Please note the following conditions as outlined in Appalachia Intermediate Unit 8's Act 48 Plan.

Intermediate Unit 8 Associates will receive hours for presentations (please refer to the Act 48 plan for details).

If you are presenting on site, the provider is the agency you are presenting for, and they will need to document participant hours.



IU 8 ACT 48 DATA FORM

Information is being requested in order to correctly credit your time in accordance with Act 48 Guidelines. If you do not hold a Pennsylvania certificate you do not need to complete this form.

All forms must be submitted at the session or within 5 days from the date of the session to:
 Appalachia IU 8, Attn: Karen Makin, IU 8 Project Assistant, 119 Park Street, Ebensburg, PA 15931.

IU 8 will *not* report hours for forms that are incomplete or that are not submitted within the specified time frame. Additionally, hours will not be reported for individuals that do not sign in at the session.

| INFORMATION (please print) | | |
|----------------------------------|-------------------|------------|
| | | |
| Name (First, Last) | | |
| | | |
| Certificate Number (SS #) | | |
| | | |
| School Entity | | |
| | | |
| Home Address | | |
| | | |
| City | State | Zip |
| | | |
| Work phone | Home phone | |
| | | |

Please complete the evaluation form on the back

Over Please ➔

IU 8 USE ONLY (Do not write in this space.)

| | | | |
|--|----------------------|------------------------|--|
| Title of this workshop/training: | | Date/Time Verification | |
| Consultant/Presenter: | | Sign In: | |
| Location: | | Sign Out: | |
| Date/Time: | | # Hours: | |
| Credit hours for this training/workshop: | Participants - up to | Verified By: | |

Revised 12/14/01

NOTE: Incomplete forms will not be processed. Forms must be submitted at the session or within 5 days to the address above.

Appalachia Intermediate Unit 8

119 Park Street, Ebensburg, PA 15931

814-472-7690

Act 48 Program Summary Sheet

Title of Session: _____

Session Description: _____

Presenter: _____

Session Date(s): _____

IU Contact: _____ Phone #: _____

Act 48 Hours for Session: Participants - _____ Trainers - _____

Is a registration in Excel file being supplied? YES NO (disk or email)
(Registration files may be emailed as an attachment to: kjm@iu08.apiu.k12.pa.us)

Sign-in and Sign-out Sheets Verified By: _____

Please complete this sheet and place the following items in a file folder (labeled with session title and date):

- ✓ Sign-in and sign-out sheets
- ✓ Data forms

*Submit Act 48 Information Within 5 Days
From the Date of the Session To:
Appalachia Intermediate Unit 8
Attn: Karen Makin, Project Assistant
119 Park Street, Ebensburg, PA 15931*

If you have any questions please contact Karen Makin at 472-7690 ext. 325

Curriculum Department Use Only

Data Entry to Excel File: _____ Date: _____

File Name: _____

Hours reported to PDE: _____ Date: _____

Certification of hours to individual: _____ Date: _____

Certification of hours to district: _____ Date: _____



Appalachia Intermediate Unit 8

Act 48 Process for Submitting Materials

Submission process for Act 48 Professional Education Hours and Credits for all Certificated Associates

The following steps will assist you when documenting Act 48 Professional Education Hours and Credits.

If you have any questions about the documentation process, please contact Karen Makin at 472-7690, ext. 325. Questions regarding the number of credits and hours/activities and programs acceptable for Act 48 professional education hours or credits should be directed to your Supervisor. Appalachia Intermediate Unit 8's Act 48 plan, all forms and the submission process for professional education hours and credits are on the IU 8 website (<http://www.apiu.k12.pa.us>).

- Review the Act 48 Plan.
- Forms to be used:
 - “IU 8 Act 48 and/or In-service Form” is to be used for Category I hours and/or in-service credit.
 - “IU 8 Act 48 and/or In-service Form” and “IU 8 Administrative Meeting/Conference Form” are to be used for conferences and meetings that fall under Category I hours.
 - “IU 8 Course Reimbursement/Act 48 Form” is to be used for course approval.
 - “IU 8 Act 48 Category II Form” is to be used for Act 48 hours that fall under Category II (see page 10 of the IU 8 Act 48 plan).
- If requesting Act 48 hours for Category II activities, an associate must follow the format outlined on page 10 of the Act 48 plan.
- Pre-approval from the director of the department is required for university/college or Continuing Professional Education Courses.
- Pre-approval from your supervisor is required on activities or programs dealing with Act 48 hours in Category I or II.

(See Other Side)

Documentation for completion of all requirements is necessary at the completion of the activity or course and forms must again be signed by the director or supervisor.

- All Act 48 and in-service documentation should then be forwarded to Karen Makin, Project Assistant, Park Street Office.

Please note the following conditions as outlined in Appalachia Intermediate Unit 8's Act 48 plan.

- Consideration will not be given for less than one-half hour of continuous time on task activity or instruction.
- The Act 48 plan provides for a limit on hours for some activities.
- All conferences must be approved by the board and two forms will need to be completed: the current form entitled "Administrative Meeting/Conference Form" and the new "Act 48 and/or In-service Form."
- College or university courses will require a transcript to be attached in order to enter the data for PDE (at this time universities will not be entering the data and it will be the responsibility of the school entity if the course/university credit is funded through the school entity).
- If a question of approval arises for Category II Professional Education Hours, the Executive Director (Dr. Michael Dillon) and/or his designee (Dr. Kay Meyers, Director of Curriculum, Training and Development) will make the final decision.
- Associates will need to sign in and out during the August 2000 in-service and pre-approval will be waived for **only** the August 2000 in-service.
- If you need a print-out of hours, you will need to log on to the PDE database site individually to retrieve this information. This information can be accessed by using the number on your certificate (your social security number). (The web site is: <http://www.pde.psu.edu>)
- As per the contract, additional professional development days are required. Please note some of these days will be eligible for in-service and Act 48 time and others only for in-service time and not Act 48. For example, the day prior to the start of classes, which is used for classroom preparation does not receive credit as Act 48 time, but will receive credit as an in-service day. Check with your supervisor if you have questions.



IU 8 ACT 48 AND/OR IN-SERVICE FORM

INSTRUCTIONS: {DO NOT SEPARATE THIS FORM.} Professional educators should complete this form; attach documentation, programs, workshop descriptions and any other information that will support the request. Employees secure supervisor pre-approval and take all copies to workshop for verification by presenter or coordinating agency representative. Be prepared to share information, materials and knowledge acquired with administration and colleagues as requested.

Name: _____ SS #: _____

Workshop/Conference Title: _____

Name of Presenter: _____

Workshop Date: _____ Workshop Time: _____

Check here if this session counts for both act 48 and in-service: Both

Act 48 Hour Value _____ In-Service Hour Value _____

How does this session pertain to the goals of the Appalachia IU 8 Act 48 Plan (pg. 17) and correlate with your position in the organization?

Supervisor's Pre-Approval: APPROVED DISAPPROVED

Supervisor's Signature: _____ Date: _____

Supervisor – Please forward to employee as notification of approval.

Employee – Please retain for agency verification. Upon completion submit to supervisor for completion approval.

Presenter/Coordinating Agency Representative's Verification
Obtain signature or attach certificate/documentation of attendance. If a certificate/documentation is not given please complete the conference attendance verification form.

Date of Workshop Hour Value Presenter or Agency Representative's Signature

Employee Signature: _____ Date: _____

Supervisor's Completion Approval: HOURS VERIFIED: _____

APPROVED DISAPPROVED **TOTAL HOURS:** _____

Supervisor's Signature: _____ Date: _____

Upon completion submit to: IU 8, Karen Makin, Project Assistant, 119 Park St., Ebensburg, PA 15931

DO NOT SEPARATE THIS FORM – After processing, the Curriculum Department will distribute copies to you and your supervisor. {Your returned stamped copy is proof of processed hours.}

*Appalachia Intermediate Unit 8
Course Reimbursement/Act 48 Form*

119 Park Street, Ebensburg, PA 15931

814-472-7690

Name: _____ SS #: _____

Position: _____

Home Address: _____
Street

_____ *Town* _____ *State* _____ *Zip*

Home Phone #: _____ Work Phone #: _____

Check one: Level I Certificate or Level II Certificate

| Course Title | Course # | Credits | IU, College or University | Date Begins | Ends |
|--------------|----------|---------|------------------------------|----------------|-------|
| _____ | _____ | _____ | _____ | _____ | _____ |

How does this course pertain to the goals of the Appalachia IU 8 Act 48 Plan (pg. 17) and correlate with your position in the organization?

Signature: _____ Date: _____

Please forward to your department's director for pre-approval.

Director: Check the Appropriate Box for Pre-Approval:

APPROVED

DISAPPROVED

Director's Signature

Date

**Director - Please forward to the Human Resource Office for verification of eligibility.
(See Other Side)**

Human Resource Director: Check the Appropriate Box for Pre-Approval:

The individual requesting pre-approval is eligible to receive reimbursement according to the applicable Bargaining Unit Agreement or Compensation Plan.

APPROVED

DISAPPROVED

Human Resource Director's Signature

Date

***HR Director – Please return this form to the employee as notification of approval.
Please forward a copy to the Accounts Payable Office.***

Request for Reimbursement – Employee should retain this form for submission of reimbursement and Act 48 credit. Complete this section after course is completed.

Please refer to the applicable bargaining unit agreement or compensation plan for reimbursement limitations.

Request is hereby made for reimbursement. An official transcript (or grade report) and a receipt verifying course payment (cancelled check will suffice) are attached with this request.

Cost of Course: \$ _____

Employee Signature: _____ Date: _____

Please submit completed form to your department's director.

Director: Check the Appropriate Box for Completion Approval:

APPROVED

DISAPPROVED

Director's Signature

Date

**DIRECTORS –
PLEASE FORWARD TO:
Karen Makin, Project Assistant
119 Park Street
Ebenburg, PA 15931**

Curriculum Department Use Only

Documentation to Accounts Payable: _____ Date: _____

Transcripts/Documentation Verified: _____ Date: _____

Data Entry for Act 48: _____ Date: _____



IU 8 ACT 48 CATEGORY II FORM

You must refer to the Act 48 plan (pg. 10) for criteria regarding Category II activities.

Name: _____ Date: _____

| | |
|--|--|
| Program | |
| Need Statement (Link to IU goals or state standards) | |
| Purpose (Link to student achievement or performance) | |
| Resources Required (Videos, trainings etc...) | |
| Method or evaluation (Related to needs and student or educator progress) | |

Employee Signature: _____ Date: _____
Please forward to your supervisor for pre-approval

(See Next Page)

SUPERVISOR: Check the Appropriate Box for Pre-Approval:

APPROVED

Hours: _____

DISAPPROVED

Supervisor's Signature: _____ Date: _____

Supervisor - Please forward to your department's director for pre-approval.

DIRECTOR: Check the Appropriate Box for Pre-Approval:

APPROVED

DISAPPROVED

Director's Signature: _____ Date: _____

Director – Please forward to employee as notification of approval.

Employee - Please retain and submit to supervisor for completion approval with documentation attached.

SUPERVISOR: Check the Appropriate Box for Completion Approval:

APPROVED

Hours: _____

DISAPPROVED

Supervisor's Signature: _____ Date: _____

SUPERVISORS – UPON COMPLETION APPROVAL PLEASE FORWARD TO:

IU8, Karen Makin, Project Assistant,
119 Park St., Ebensburg, PA 15931



IU 8 ACT 48 CONFERENCE ATTENDANCE VERIFICATION FORM

INSTRUCTIONS: This form should be completed for conference attendance when the agency does not provide a certificate or documentation of attendance. Employees should attach the session(s) agenda and handouts.

Name: _____

Conference Title: _____

| Session Date | Session Name | Hour(s) | Presenter |
|--------------|--------------|---------|-----------|
| | | | |
| | | | |
| | | | |
| | | | |

Presenter or Agency Representative's Signature

Date

Please attach this form and documentation to your IU 8 Act 48 and/or In-Service Form.



IU 8 ACT 48 / IN-SERVICE RECORDS CORRECTION FORM

INSTRUCTIONS: This form should be completed and submitted with your processed copy of any act 48 / in-service forms that appear incorrectly on the PDE Records Management System or IU 8 computer system. Once the correction is made your documentation will be returned indicating that it was processed.

Name: _____ SS #: _____

| Session Date | Session Name | # of Hours | | Correction Needed to | | Description of Change / Deletion Needed |
|--------------|--------------|------------|------------|----------------------|---------------|---|
| | | Act 48 | In-service | PDE or | IU 8 Printout | |
| | | | | | | |
| | | | | | | |

Signature: _____ Date: _____

Please submit to your supervisor for approval.

Supervisor: Check the Appropriate Box for Correction Approval:

APPROVED

DISAPPROVED

**SUPERVISORS –
PLEASE FORWARD TO:**
Karen Makin, Project Assistant
119 Park Street
Ebenburg, PA 15931

Supervisor's Signature *Date*

Curriculum Department Use Only

Approval for Correction: _____ Date: _____

Correction to PDE: _____ Date: _____

Correction to AS 400: _____ Date: _____