

**U.S.D. #617 SPECIAL EDUCATION  
PARAEDUCATOR PROFESSIONAL DEVELOPMENT REQUEST FOR  
KNOWLEDGE LEVEL POINTS**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Professional Development: \_\_\_\_\_ Location: \_\_\_\_\_

Who presented the professional development program? \_\_\_\_\_

Topics Discussed at the Program and Number of Hours for Each Topic:

TOPIC	HOURS
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Hours Requested for Knowledge Level Points: \_\_\_\_\_

What did you learn by attending? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use the back if needed)

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Presenter's Verification:

I verify that the above participant was in attendance.

Presenter's signature: \_\_\_\_\_



Knowledge Level Professional Development Hours Earned \_\_\_\_\_ Director's Initials: \_\_\_\_\_

Specific Hours \_\_\_\_\_ or General Hours \_\_\_\_\_