

# Xenia Community Schools Local Professional Development Committee

## PDP Revision or Amendment

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

Please check one:  Revision

Amendment

Attach the pertinent LPDC form(s) with newly completed item(s) or complete this form.

What is being changed? (Refer to form title and item)

Describe the change in your plan

### LPDC USE ONLY

This proposal or activity has been:

Approved

Revisions requested for reasons listed; Candidate should modify and resubmit.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Notes: