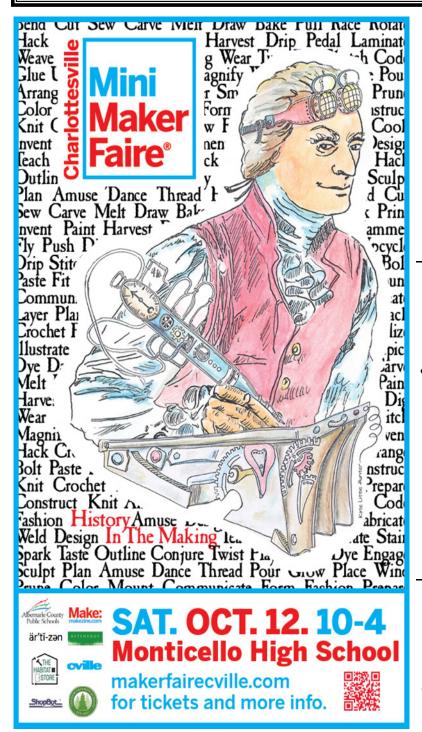
# WANT TO EARN RECERTIFICATION POINTS FOR PARTICIPATING IN MINI MAKER FAIRE?





#### <u>TIER 1:</u>

6 Recertification Points (use Option 8)

- register to attend, participate in the full day of events (sign-in if prompted)
- complete the form on the back (or fill it out in printable format at <a href="http://bit.ly/ACPS-PD-Form">http://bit.ly/ACPS-PD-Form</a>)
   and send it via the Pony or email to Shelia Waddy (<a href="waddy@k12albemarle.org">waddy@k12albemarle.org</a>) at ARC

#### **TIER 2:**

15 Recertification Points per Specific Presentation
Topic (use Option 2)

- Submit your project for Charlottesville Mini Maker Faire 2013, register to attend, participate in the full day of events (sign-in if prompted), and deliver your "presentation" per your proposal
  - complete the form on the back (or fill it out in printable format at <a href="http://bit.ly/ACPS-PD-Form">http://bit.ly/ACPS-PD-Form</a>)
     and send it via the Pony or email to Shelia Waddy (<a href="waddy@k12albemarle.org">waddy@k12albemarle.org</a>) at ARC

### <u>TIER 3:</u>

Up to 90 Recertification Points (use Option 7)

\*\*REQUIRES PRIOR APPROVAL

Email Becky Fisher (<u>bfisher@k12albemarle.org</u>) to discuss the requirements of and <u>receive prior</u> <u>approval</u> for an Educational Project related to the Charlottesville Mini Maker Faire. Per the Virginia Department of Education, for recertification purposes "An educational project is an option for the license holder to enhance the skills or advance the educational needs of the group being served."

## ALBEMARLE COUNTY SCHOOLS RECERTIFICATION POINT SYSTEM/PROFESSIONAL DEVELOPMENT ACTIVITY ENROLLMENT FORM

This form is to be used to verify the completion of in-service activities sponsored by Albemarle County Schools (i.e. school-based workshops, sessions offered through *Opportunities*, etc.).

Please print in ink all information requested below.		
ACTIVITY TO BE COUNTED TOWARDS: Recertification Points	Staff Development	Both
CERTIFICATE HOLDER'S NAME:	SOCIAL SEC. NO	
CURRENT ASSIGNMENT:	SCHOOL/DEPT.:	
TITLE OF ACTIVITY:		
BEGINNING DATE:	ENDING DATE:	
NO. OF HOURS ENGAGED IN THIS ACTIVITY:	OPTION NO:	
TO BE COMPLETED BY INST  I verify that by completing the activity described above, this certificate h can be awarded for activities that are five or more hours in length.	<del>-</del>	* recertification points. Points
INSTRUCTOR'S/PRESENTER'S NAME (Please print)		
INSTRUCTOR'S/PRESENTER'S SIGNATURE		DATE

\*If uncertain as to the number of recertification points to award, please contact the Albemarle County Resource Center.

White: Human Resources Yellow: Employee Pink: Principal/Advisor