

TROUP COUNTY SCHOOL SYSTEM  
APPLICATION FOR PROFESSIONAL LEARNING CREDIT  
**for a training activity OUTSIDE the school system**

PL 02

(e.g., college or university class, non-system online course, etc.) **Does NOT apply to RESA courses.**

Name: \_\_\_\_\_ School: \_\_\_\_\_

Date of application: \_\_\_\_\_ Position \_\_\_\_\_

Principal's signature \_\_\_\_\_

Title of training activity: \_\_\_\_\_

What **School Improvement Objective** does this training address?

Beginning date: \_\_\_\_\_ Ending date: \_\_\_\_\_

Training agency: \_\_\_\_\_ Location of activity: \_\_\_\_\_

Activity sponsored/approved by: \_\_\_\_\_

Description of activity: \_\_\_\_\_

Description of need addressed by this activity: \_\_\_\_\_

Number of actual hours of direct training: \_\_\_\_\_ Number of PLU's requested: \_\_\_\_\_

(Actual number of hours of instruction must be documented by a certificate of completion, a letter from the training director, and/or an agenda/program which lists specific hours, etc. The documentation should be attached to this form when it is submitted.)

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

\_\_\_\_\_  
Signature of Dr. Penny Johnson, Assistant Superintendent

\_\_\_\_\_  
Date

**ATTENTION: Prior approval by the school system's assistant superintendent for curriculum and instruction is required before you take a course for PLU credit.**  
**Please return this application to Karen Cagle, Assistant Superintendent, 100 North Davis Road, Building C, a minimum of 2 weeks BEFORE attending the training activity.**