

# Van Buren Schools

*Preapproval Form: To be submitted prior to engaging in Educational Projects*

<b>Name:</b>	
<b>Date:</b>	
<b>Contact Hours Requested:</b>	
<b>I will be submitting (Must choose two):</b> <input type="checkbox"/> Log <input type="checkbox"/> Final Project (please describe in description of project) <input type="checkbox"/> Reflective Summary	
<b>Description of Project:</b>	
<b>How will this project enhance your work or specialization in education?</b>	
<b>IPDP Goal(s) applicable to this Educational Project?</b>	
<b>Educational Standards related to goal(s):</b>	
<b>Signature of Applicant:</b>	<b>Date:</b>

**Do not Mark Below This Line. For LPDC use only.**

**Revise / Resubmit**

**Revision Advice:**

**OR**

**Approved as Written**

**Approval Signature:**

**Date:**