Clear Form

Office of Staff Development
MONTGOMERY COUNTY PUBLIC SCHOOLS
Upcounty Regional Services Center
12900 Middlebrook Road
Germantown, Maryland 20874

CONTINUING PROFESSIONAL DEVELOPMENT (CPD) COURSE REGISTRATION FOR PROFESSIONAL STAFF

INSTRUCTIONS: This form is used to register for MCPS-sponsored *Continuing Professional Development (CPDs) courses.* CPDs are Maryland State Department of Education (MSDE) approved credit-bearing courses. Applicant should complete one form for each course desired. Please complete Parts I and II. Return this form to the Office of Staff Development, Upcounty Regional Services Center or by fax to 301-601-4699. Course confirmations will be sent out by FirstClass. **Twenty-five dollar ($25) nonrefundable registration fee due with registration for 3-credit reading courses.**

PART I: To Be Completed by Applicant – PLEASE PRINT

_____ _____/_____/_____
Name (Last, First, Middle Initial – Print your legal name.) *Social Security Number*

Please indicate FirstClass account name _____

_____ _____-_____-_____ _____-_____-_____
School/Department/Division *Home Phone* *Work Phone*

_____ ☐ 12-month ☐ 10-month
Job/Position

_____ _____
Subject (if applicable) *Grade*

Requested Course:

_____ _____ _____ _____
Code *Title* *Section Number* *Number of Credits*

Class Schedule:

_____ _____ _____
Date(s) *Time* *Class Location*

_____ _____/_____/_____
Signature, Applicant *Date*

PART II: To Be Completed by Principal or Supervisor

Check One:

☐ This course is related to employee's assignment

☐ This course is not related to employee's assignment

Check One:

☐ I recommend enrollment

☐ I do not recommend enrollment

_____ _____/_____/_____
Signature, Principal/Supervisor *Date*

PART III: To Be Completed by the Office of Staff Development and Returned to Employee (if not on FirstClass).

☐ You have been admitted to the program/course. ***You will not receive additional notification.*** If you cannot attend, you must call the OSD office, 301-601-4869.

☐ You have been enrolled in a different section _____

☐ Your registration has not been accepted for the following reason:

☐ Overenrollment ☐ Late registration ☐ Inappropriate audience

☐ Other: _____ ☐ Course canceled ☐ You are already scheduled for a course at this time

_____ _____/_____/_____
Signature, Office of Staff Development Representative *Date*

MCPS Form 440-7, Rev. 9/01 DISTRIBUTION: COPY 1/Office of Staff Development (OSD); COPY 2/Retain