APPLICATION FOR APPROVAL OF LOCAL INSTITUTE

Submit this form with agenda and time schedule to:
Dr. Darlene J. Ruscitti, Regional Superintendent
DuPage County Regional Office of Education
421 N. County Farm Road
Wheaton IL 60187
Fax to: 630.407.5802 or email: rwadsworth@dupageroe.org

If faxing or emailing the form to the ROE, no need to send a hard copy.

<table>
<thead>
<tr>
<th>INSTITUTE INFORMATION</th>
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<tr>
<td>Must be submitted 30 days prior to the Institute Day</td>
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<tr>
<td>Must include 5 hours of Professional Development Activities</td>
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<tr>
<td>Must include Agenda with time schedule</td>
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District Name and Number:  
Date of Institute:  
Hours From:  
To:  
Contact Person:  
Phone #:  
Position:  
Email Address:  

School districts are responsible for issuing professional development credit to participants for hours meeting the criteria as set by ISBE.

The Regional Superintendent’s approval on this application is based on an agenda showing a minimum of 5 hours of professional learning experiences as indicated in Section 3-11 of the School Code of Illinois.

Signature: ___________________________  Date: ___________________________

Position: ___________________________  Phone: ___________________________

To Be Completed by ROE

Approved: ___________________________  Signed: ___________________________

Dr. Darlene J. Ruscitti, Regional Superintendent