

COARSEGOLD UNION SCHOOL DISTRICT

Mailing: 45426 Road 415, Coarsegold, CA. 93614-9522

Location: 50200 Road 427, Oakhurst, CA.

(559) 683-2996... FAX (559)683-4160

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INDIVIDUAL ASSISTANCE PLAN  
APPLICATION

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

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

Status: \_\_\_\_\_New Teacher \_\_\_\_\_Veteran Teacher

Reason you are applying: (Change in grade level, to target improvement in a particular subject, etc...)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you attended any district paid conferences, symposiums, etc. this year or last?  
Please list:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please outline your individual assistance plan. Include any professional materials you wish to order or conferences, workshops or symposiums you wish to attend, including the cost for each. If you wish to do observations, please list the approximate number, dates, and the person(s) you wish to observe.

How would you share this professional growth with the staff in order to provide further staff development with others?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Remember this plan needs to be designed to provide for your professional growth and help you meet your professional growth goals. The goal of the PAR Panel is to provide opportunities for professional development to as wide a range of staff as possible. Plans will be approved based on relation to assignment, need, number of applications, and the amount of money available in the budget.

**PROPOSED BUDGET**

Conference Fees (5200)	\$ _____
Cost of Substitute (1120)	\$ _____
Mileage (5200)	\$ _____
Professional Materials (4200) books	\$ _____
Other Supplies (4310) Equipment (6190)	\$ _____
<b>TOTAL</b>	\$ _____

Please submit this plan far enough in advance of any event in order to allow the Panel time for consideration and approval. A purchase order will be authorized once the Panel approves the plan.

Principal Approval \_\_\_\_\_

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**FOR PANEL USE ONLY:**

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Not Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Purchase Order # \_\_\_\_\_