ACT 48 PROFESSIONAL EDUCATION
STUDENT DATA SHEET

Professional Personnel ID# (from PDE) _____

First Name_____ Last Name_____

Address_____

City_____ State_____ Zip_____

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Date of Birth _____

Email address: _____

We will submit two of your chosen courses which satisfy the 180 hours required by the Pennsylvania Department of Education for Act 48 for each five year reporting period.

One three credit course = 90 clock hours

Course Name and Number to be submitted:

1. _____

Date from:_____ Date to: _____

2. _____

Date from:_____ Date to:_____

Student Signature_____

Date_____

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