



## PROFESSIONAL GROWTH PLAN AND RECORD FORM For Child Development Permits

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This packet contains a brief outline of the professional growth requirement necessary to renew your Child Development Permit and the form that is to be used to record your activities. Detailed information regarding professional growth requirements can be found in the [Professional Growth Manual for Child Development Permits](#) available on the Commission's website.

### Step 1: Obtain a professional growth advisor

The key to successful renewal is to work closely with a professional growth advisor. This advisor will serve as your mentor, helping you to set goals that will be valuable to your professional growth. The advisor will also discuss with you the professional growth activities that will best contribute to your competence, performance, or effectiveness as an early childhood educator. The advisor will verify that you have completed your professional growth activities.

### Step 2: Plan your activities

Formulate a set of goals with your advisor and complete boxes 7-10 on the Professional Growth Plan and Record Form. Choose your activities and complete boxes 11-15. Your advisor must sign on line 19, certifying that your initial plan meets the standards outlined in the [Professional Growth Manual for Child Development Permits](#). *Note: You must complete activities in at least two categories.*

### Step 3: Complete your activities and keep records

As you complete your professional growth activities, you should meet with your advisor to discuss your progress. Enter the total time spent on your activities in box 16. Your advisor will verify the hours and complete box 17. You may amend your goals and activities during the five year renewal cycle. Discuss any changes with your advisor, and together, update boxes 9 through 15. Once you have completed the required hours, sign on line 20 and have your advisor sign on line 21.

### Step 4: Renew your permit

Renew your permit by one of the following methods:

- Renew online by logging into your personal [Educator Page](#), or
- Submit a completed *Application for Renewal* ([form 41-4](#)) to the Commission office

Both methods allow you to self-verify the completion of your professional growth requirements; however, you must keep the completed, original *Professional Growth Plan and Record Form* in your possession in case of audit. If you choose not to self-verify, submit the completed *Professional Growth Plan and Record Form* with application [form 41-4](#) to the Commission office.

Permit holders renewing more than one permit must submit a separate application and fee for each, but only one *Professional Growth Plan and Record Form*.

# COMO RENOVAR SU PERMISO DEL DESARROLLO INFANTIL

Este paquete contiene una breve descripción de los requisitos de crecimiento profesional (*Professional Growth*) para renovar su permiso del Desarrollo Infantil (*Child Development Permit*). Incluye también el formulario para documentar las horas cumplidas de crecimiento profesional. Favor de referirse al Manual Del Crecimiento Profesional ([\*Professional Growth Manual for Child Development Permits\*](#)) para más información sobre estos requisitos. Este manual se encuentra en el website de la Comisión.

## **Primer Paso: Obtenga un Consejero del Crecimiento Profesional**

La clave para renovar su permiso es trabajar con su consejero. El consejero es como un mentor, ayudándole a establecer metas que le servirán para su crecimiento profesional. Su consejero también conversará con usted sobre sus actividades de crecimiento profesional que contribuirán a su capacidad, desempeño o efectividad como educador principiante de menores. Su consejero verificará que usted haya cumplido con sus actividades del crecimiento profesional.

## **Segundo Paso: Planee sus actividades**

Formule sus metas con su consejero y llene las secciones 7-10 del formulario de Plan y Expediente del Crecimiento Profesional (*Professional Growth Plan and Record Form*). Seleccione actividades que cumplan con sus metas y llene las secciones 11-15. Su consejero deberá firmar la sección 19 certificando que su plan inicial cumple con las normas mencionadas en el manual. *Por favor note que por lo menos actividades en dos categorías son requeridas.*

## **Tercer Paso: Complete sus actividades y mantenga un expediente**

Según vaya terminando sus actividades del crecimiento profesional, usted deberá ver a su consejero para hablar sobre su progreso. En el formulario de Plan Y Expediente del Crecimiento Profesional, llene la sección 16 cuidadosamente y verifique razonablemente el tiempo que le haya tomado y así su consejero podrá llenar la sección 17. Usted puede cambiar sus metas y actividades durante el período de renovación de cinco años. Hable sobre los cambios con su consejero y él/ella tendrá que llenar las secciones 9-15. Una vez que haya cumplido con las horas requeridas, firme la sección 20 y su consejero firmará la sección 21.

## **Cuarto Paso: Renueve su permiso**

Renueve su permiso en **uno** de los metodos siguientes:

- Electronicamente - website: <http://www.ctc.ca.gov/credentials/online-services/default.html>
- Enviando por correo a la Comisión la solicitud [41-4](#)

Ambos metodos le permiten hacer una declaración personal de que los requisitos de crecimiento profesional han sido cumplidos, pero debe mantener el formulario de Plan y Expediente del Crecimiento Profesional por si se hace un auditoría. Si prefiere no hacer solo la declaracion, llene y envíe por correo a la Comision la solicitud [41-4](#) con el formulario de Plan Y Expediente del Crecimiento Profesional.

Para los que poseén y van a renovar más de un permiso, es necesario enviar una solicitud y un pago para cada permiso, pero sólo incluya un formulario de Plan y Expediente del Crecimiento Profesional.



State of California  
 Commission on Teacher Credentialing  
 Certification Division  
 1900 Capitol Avenue  
 Sacramento, CA 95811-4213

Email: [credentials@ctc.ca.gov](mailto:credentials@ctc.ca.gov)  
 Website: [www.ctc.ca.gov](http://www.ctc.ca.gov)

## PROFESSIONAL GROWTH PLAN AND RECORD FORM For Child Development Permits

Please fill out this form **completely**. Before you begin, please read the instructions in the *Professional Growth Manual*. Make enough copies of this form to include all of the goals, activities, and amendments that you plan and complete.

1. **Name:** \_\_\_\_\_  
*Last* *First* *Middle*

2. **Home Address:** \_\_\_\_\_  
*Number* *Street* *Apt. No.*

\_\_\_\_\_

*City* *State* *Zip Code*

3. **Daytime Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

4. **Social Security Number:** \_\_\_\_\_

5. **List each credential and/or permit you hold:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. **List each professional growth advisor who has advised you.**

First Advisor \_\_\_\_\_ Approximate Dates of Service \_\_\_\_\_

Credential /Permit Held \_\_\_\_\_ Credential/Permit Number \_\_\_\_\_

Second Advisor \_\_\_\_\_ Approximate Dates of Service \_\_\_\_\_

Credential/Permit Held \_\_\_\_\_ Credential/Permit Number \_\_\_\_\_

Third Advisor \_\_\_\_\_ Approximate Dates of Service \_\_\_\_\_

Credential /Permit Held \_\_\_\_\_ Credential/Permit Number \_\_\_\_\_

### Professional Growth Plan

7. Goal Numbers	8. Professional Growth Goals	9. Date Approved	10. Advisor's Initials

Professional Growth Activities (by goal number and category)			Approval of Planned Activities		Verification of Completed Activities	
11. Professional Growth Activities	12. Goal Number(s)	13. Category (two minimum)	14. Date Activity Approved	15. Advisor's Initials	16. Time Spent (in hours)	17. Advisor's Initials and Date
<i>Make additional copies of this form if necessary</i>					<b>(18) Total Hours Spent</b> _____	

**19. Certification of Initial Plan by Advisor**

I certify that, to the best of my knowledge, the plan activities comply with state laws and regulations.

\_\_\_\_\_

*Advisor's Name*

*Advisor's Signature*

*Date*

**20. Verification by Credential Holder**

Under penalty of perjury, I certify that, to the best of my knowledge, the information on this form is accurate.

\_\_\_\_\_

*Permit Holder's Signature*

*Date*

**21. Verification of Completion**

I certify that I have been this permit holder's advisor, and that, to the best of my knowledge, the above information is accurate.

\_\_\_\_\_

*Advisor's Name*

*Advisor's Signature*

\_\_\_\_\_

*Name of Employing Agency*

*Daytime Telephone Number*

*Date of Verification*