

**REGION 7**

**PENNSYLVANIA INSPIRED LEADERSHIP PROGRAM**

**“Creating Inspired Leaders at All Levels”**

**2015-2016 Application**

**Please apply ASAP**

**Enrollment is limited.**

**The number of credits/hours per course encompasses both in-class activities and out-of-class assignments.**

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| --- | --- | --- | --- |
| **Name of Applicant**  |       | **Title** (Ms. Mrs. Mr. Dr. Fr. Sr.) |       |
| **Name to be printed on certificate** |       |
| **Present Position** (ex. High School Principal) |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Check** | **COHORT****NISL Course 1 is a prerequisite for NISL Courses 2, 3, 4** | **Act 48 PIL Credits****CPE Hours** | **No. of****Days** | **PIL****REGION** | **LOCATION**(first session) | **START****DATE** |
| **[ ]**  | **NISL Course 1A (Induction) ~~🞽~~****Filled** | 3 Credits90 Hours | 8 | 7 | Allegheny IU3 | 7-7-15 |
| **[ ]**  | **NISL Course 1B (Experienced)** | 3 Credits90 Hours | 8 | 7 | Allegheny IU3 | 10-7-15 |
| **[ ]**  | **NISL Course 1C (Induction) ~~🞽~~** | 3 Credits90 Hours | 8 | 7 | Allegheny IU3 | 2-23-16 |
| **[ ]**  | **NISL Course 2A** | 3 Credits90 Hours | 8 | 7 | Beaver Valley IU27 | 7-21-15 |
|  **[ ]**  | **NISL Course 2B** | 3 Credits90 Hours | 8 | 7 | Allegheny IU3 | 2-16-16 |
| **[ ]**  | **NISL Course 2C****Filled** | 3 Credits90 Hours | 8 | 7 | Beaver Valley IU27 | 10-20-15 |
| **[ ]**  | **NISL Course 3A** | 1.5 Credits45 Hours | 4 | 7 | Allegheny IU3 | 8-4-15 |
| **[ ]**  | **NISL Course 3B** | 1.5 Credits45 Hours | 4 | 7 | Allegheny IU3 | 4-5-16 |
| **[ ]**  | **NISL Course 4A🞽**  **Filled** | 2 Credits60 Hours | 6 | 7 | Beaver Valley IU27 | 9-29-15 |
| **[ ]**  | **NISL Coaching A** (prerequisite – NISL Course 1) | 1 Credit30 Hours | 3 | 7 | Westmoreland IU7 | 8-11-15 |
| **[ ]**  | **NISL Coaching B** (prerequisite – NISL Course 1) | 1 Credit30 Hours | 3 | 7 | Allegheny IU3 | 3-28-16 |
| **[ ]**  | **NISL Early Childhood Executive Leadership Institute (ECELI)** | 2 Credits60 Hours | 5 | 7 | Allegheny IU3 | 7-14-15 |

**🞽 Required for Principal Induction Program**

**YEARS AS AN ADMINISTRATOR:**

(Please indicate the number of years of administrative experience through June 2014.)

|  |  |  |  |
| --- | --- | --- | --- |
| **POSITION** | **YEARS** | **POSITION** | **YEARS** |
| **Assistant Principal** |      | **Intermediate Unit Assistant Executive Dir.** |      |
| **Principal**  |      | **Intermediate Unit Executive Director** |      |
| **Assistant Superintendent**  |      | **Vocational-Technical School Director** |      |
| **Superintendent**  |      | **Other (Please list.)**      |      |
| Date Hired in Current Position:       |
| Were you a principal prior to January 1, 2008? If so, where and when.        |
| Are you a new assistant/vice principal or principal who must fulfill the Act 45 Principal Induction Program requirement?[ ]  Yes [ ]  No |

**APPLICANT INFORMATION:**

|  |  |
| --- | --- |
| **Intermediate Unit** |       |
| **County** |       |
| **School District** |       |
| **District AUN#** (9 digit) |       | <http://www.edna.ed.state.pa.us/Screens/wfSearchEntity.aspx> |
| **No. of Students in District**  |       |
| **School** |       |
| **No. of Students in School** |       |
| **List grades in you oversee, including pre-school programs.** |       |
| **School Address** |       |
| **City/State/Zip Code** |       |
| **Office Phone** |       |
| **Office Fax** |       |
| **Home Address** |       |
| **City/State/Zip Code** |       |
| **Home Phone** |       |
| **Cell Phone** |       |
| **Email address** |       |

**EDUCATION:** (Please cite most recent experience first.)

|  |  |  |
| --- | --- | --- |
| **UNIVERSITY/COLLEGE** | **DEGREE** | **DATE OBTAINED** |
|       |       |       |
|       |       |       |
|       |       |       |

**PA CERTIFICATES HELD:**

|  |  |
| --- | --- |
| **CERTIFICATE** | **DATE ISSUED** |
|       |       |
|       |       |
|       |       |

**PRIOR ADMINISTRATIVE EXPERIENCE:**

|  |  |
| --- | --- |
| **Title** |       |
| **Dates employed** |       |
| **School District**  |       |
| **City, State, Zip Code** |       |
|  |  |
| **Title** |       |
| **Dates Employed** |       |
| **School District** |       |
| **City, State, Zip Code** |       |

**ACT 48 CREDIT:**

|  |  |
| --- | --- |
| **PPID Number** |       |
| **What year does your current Act 48 compliance period end?**  |      |
| **How many additional Act 48 PIL hours do you need by the end of your compliance period?** |      |

**Participants will be awarded Act 48 PIL hours/CPE credits at the completion of a course. In order to receive Act 48 PIL hours/CPE credits, participants must participate in all activities and attend all sessions or make up sessions missed at their regional location or in another region.**

**SUPERVISOR INFORMATION:­**

|  |  |
| --- | --- |
| **Name** |       |
| **Supervisor’s Title** |       |
| **Supervisor’s District or School** |       |
| **Office Address** |       |
| **City, State, Zip Code** |       |
| **Office Phone** |       |
| **Office Fax** |       |
| **Email Address** |       |

**STATEMENTS OF UNDERSTANDING AND AFFIRMATION:**

|  |  |
| --- | --- |
| **CHECK** |  |
| **[ ]**  | I understand thatin order to receive Act 48 PIL hours/CPE credits for a course, I must participate in all activities and attend all sessions. In the event that I miss a day or part of a day, I will make up the session in either my or another region.  |
| **[ ]**  | I understand that there will be a considerable amount of preparation including prior reading assignments and, in some cases, online work for each unit.  |
| **[ ]**  | I understand that I will be expected to complete job-embedded activities throughout the course. |
| **[ ]**  | I affirm that my supervisor: (1) supports my participation in this program; and (2) agrees to provide release time for me to attend all course sessions. |

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| **REGION 7** |
| **IUs -- 1, 2, 3, 7, 27****Denise Pilarski**Allegheny IU 3 475 East Waterfront Drive Homestead, PA 15120 412-394-5709 412-394-5750 (Fax) denise.pilarski@aiu3.net |

 **REQUIRED INFORMATION**

**Please return this completed application to:**

 **All program costs, including tuition, meals, and materials, will be paid by the Pennsylvania
Department of Education except for participant mileage expenses to the course locations.**

**Additional information may be obtained online at:**

[**http://www.education.state.pa.us/portal/server.pt/community/pa\_inspired\_leaders/8922**](http://www.education.state.pa.us/portal/server.pt/community/pa_inspired_leaders/8922)

**Region 7 Complete Course Calendar can be found on our web page:**

[**http://www.aiu3.net/Level3.aspx?id=4022**](http://www.aiu3.net/Level3.aspx?id=4022)

 **Questions?? Call PA Inspired Leadership at 412-394-5752 or E-mail: denise.pilarski@aiu3.net**