

**SANDUSKY CITY SCHOOLS –LPDC REVISION OF AN  
INDIVIDUAL PROFESSIONAL DEVELOPMENT**

**NAME** \_\_\_\_\_

**SCHOOL** \_\_\_\_\_

**My IPDP was approved by** \_\_\_\_\_ **on** \_\_\_\_\_

**I would like to add the following Teacher/Administrator Standard(s) to my  
plan:**

**I would like to add the following SMART goal(s) to my plan:**

**LPDC SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_