This form is used by full-time professors for pre or post-approval for professional development activities to count toward Professional Growth Increment (PGI). Adjunct Faculty may apply for Professional Growth Hourly Incentive (PGH) via this link: [Petition Adjunct Professional Growth Hourly Incentive](https://mtsac0-my.sharepoint.com/personal/lromo_mtsac_edu/Documents/Microsoft%20Teams%20Chat%20Files/Petition%20Adjunct%20Professional%20Growth%20Hourly%20Incentive).

Professors are only required to submit non-Mt. SAC professional development and both Mt. SAC and non-Mt. SAC college courses for approval to the Salary and Leaves Committee. Pre-approved district professional development, such as POD workshops approved for PGI, do not need to be submitted by individual faculty members to the Salary and Leaves Committee for approval to count towards PGI.

Faculty submit POD Connect Certificates verifying completion of POD workshops approved for PGI directly to HR. (Please note, faculty will not be able to obtain a POD Connect certificate for POD workshops completed between July 1, 2016 and July 1, 2019. For those, please obtain the POD Director's verification of attendance [using this form](https://www.mtsac.edu/pod/documents/pgi_sac/Faculty_Professional_Growth_Increment_Memo_FORM.pdf).)

|  |
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| **PART 1: GENERAL INFORMATION** |
|  |
| Name: |       |  |       |
|  | Last | First | Middle Initial |  | A # |

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|  |
| Email: |       | Phone: |       |
|  |
| Division: |  | Department |       |

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|  |
| I teach the following courses **(Please include course title and course number):** |
|  |
|  |       |  |
|  |
| ***Applicant – please continue on page 2*** |
|  |

***OFFICE USE ONLY – SALARY & LEAVES COMMITTEE***

|  |
| --- |
|  |
| *Petition received by Salary and Leaves*  | *Date:* |  | *by:* |  |
|  |
| *Action of Salary and Leaves Subcommittee:* |
|  |
|  | *Approved by:* | *(Signature)* |  |  |  |  |  |
|  | Co-Chair Vice President, Human Resources (or Designee) | Printed Name | Date |
|  |
|  | *(Signature)* |  |  |  |  |  |
|  | Co-Chair Faculty Salary & Leaves Committee Member (or Designee) | Printed Name | Date |
|  |
|  | *Denied* |  | *Partially Approved* |  |
|  |
|  |  | *Does not meet established criteria* |  | *Not in applicant’s specific area of instruction or service* |
|  |
|  |  | *Not from a recognized accredited institution* |  |  |
|  |
|  |
|  |
| *Action of Salary and Leaves Committee (if necessary):* |
|  |
|  |  |  |
|  |
| *Faculty Member notified by:* |  | *via* |  | *Date:* |  |
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| **PART 2: Listing of Coursework** |
|  | Note: A unit member may propose any college course for the Professional Growth Increment (PGI). Courses used for the PGI may not be additionally used for credit towards column crossover, SPOT, or self-certification FLEX activities.**The petition for Professional Growth form shall include the published course or workshop/seminar announcement or link to these materials. Must include content and dates and times of activity. *(See A.6.c of Faculty Agreement)*** |  |
|  |
|  | **1.** | Course Name: |       | Course # |       |  |
|  |
|  |  | Course description: |  |
|  |
|  |  |       |  |
|  |
|  |  | Rationale of how course is directly related to basic assignment, will be of direct benefit to the College, and/or will meet some educational need of students: |  |
|  |
|  |  |       |  |
|  |
|  | Units: |       | Number | [ ]  | Semester | [ ]  | Quarter |  |  |
|  |
|  |  | [ ]  | Undergraduate | [ ]  | Graduate |  |  |
|  |
|  | Name of College/University: |       |  |
|  |  |  |  |
|  | Department: |       | When will course be taken? |       |  |
|  |
|  |
|  | **2.** | Course Name: |       | Course # |       |  |
|  |
|  |  | Course description: |  |
|  |
|  |  |       |  |
|  |
|  |  | Rationale of how course is directly related to basic assignment, will be of direct benefit to the College, and/or will meet some educational need of students: |  |
|  |
|  |  |       |  |
|  |
|  | Units: |       | Number | [ ]  | Semester | [ ]  | Quarter |
|  |
|  |  | [ ]  | Undergraduate | [ ]  | Graduate |
|  |
|  | Name of College/University: |       |  |
|  |  |  |  |
|  | Department: |       | When will course be taken? |       |  |
|  |
| ***For additional courses, please attach additional sheets as needed.*** |

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| **PART 3: Listing of non-Mt. SAC institutes, symposia, conference, workshops, or other professional development activities** |
|  |
|  | **The petition for Professional Growth form shall include the published course or workshop/seminar announcement or link to these materials. Must include content and dates and times of activity. *(See A.6.c of Faculty Agreement)*** |
|  |
|  | **1.** | Workshop Name: |       |  |
|  |
|  |  | Workshop Description: |  |
|  |
|  |  |       |  |
|  |
|  |  | Rationale of how course is directly related to basic assignment, will be of direct benefit to the College, and/or will meet some educational need of students: |  |
|  |
|  |  |       |  |
|  |
|  | Number of hours I am requesting as credit for attendance: |       | Attendance Date: |       |  |
|  |
|  | Name of Sponsoring Organization: |       |  |
|  |
|  |  |  |
|  | **2.** | Workshop Name: |       |  |
|  |
|  |  | Workshop Description: |  |
|  |
|  |  |       |  |
|  |
|  |  | Rationale of how course is directly related to basic assignment, will be of direct benefit to the College, and/or will meet some educational need of students: |  |
|  |
|  |  |       |  |
|  |
|  | Number of hours I am requesting as credit for attendance: |       | Attendance Date: |       |  |
|  |
|  | Name of Sponsoring Organization: |       |  |
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| **PART 4: Applicant’s Statement** |
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| In submitting this request, I understand: |
|  |
|  | Only courses in which I receive a grade of "C" or better will be accepted for PGI. (If pass/no pass, verification of a "C" or better grade must be received from the instructor.) |
|  |
|  | Verification of course or non-Mt. SAC workshop/seminar completion for Professional Growth must be submitted to the Human Resources office. |
|  |
|  | Courses and workshops/seminars used for the PGI may not be additionally used for credit towards column crossover, SPOT, or self-certification flex activities. |
|  | Courses and workshop/seminars for which I request reassigned time or reimbursement of expenses cannot be submitted for PGI.  |
|  |
|  |
|  |
| Signature of Applicant: |  | Date: |       |  |
|  |