

# South Georgia College

## Professional learning Unit (PLU) Course Completion Form

*To document satisfactory completion of PLU courses*

### Participant Information

Name: \_\_\_\_\_ SS# \_\_\_\_\_

Employing System: \_\_\_\_\_

School/Worksite: \_\_\_\_\_

### Course Information:

Course Title: \_\_\_\_\_

Date of Completion of all course requirements

Including assessment: ..... \_\_\_\_\_

Total Contact Hours of the Course: ..... \_\_\_\_\_

Number of PLU Credits: ..... \_\_\_\_\_

### Check the categories for which this PLU credit applies:

- |  |  |
|--|--|
| <input type="checkbox"/> Field(s) of Certification   | <input type="checkbox"/> School/System/Individual Improvement Plan |
| <input type="checkbox"/> Annual Personnel Evaluation | <input type="checkbox"/> State/Federal Requirements                |

### Training Agency Information:

Agency Name: South Georgia College  
Office of Continuing Education

Contact Person: Amy Hancock, Director Phone: 912.260.4461

### Verifications:

#### Option I: Mastery Verification

Prepared Phase/Contact Hours Completed

\_\_\_\_\_  
*Instructor's Signature*

\_\_\_\_\_  
*Date*

#### Option II: On-The-Job Assessment

\_\_\_\_\_  
*Observer's Signature*

\_\_\_\_\_  
*Date Assessment Completed*