# APPENDIX O3 PGA RECORDING FORM: PROFESSIONAL ACTIVITIES and PROJECTS (Appendices A, B, C.1, and Article 38.4.3)

Foothill-De Anza Community College District

### <u>Use this form to file PROFESSIONAL ACTIVITIES and PROJECTS including service on TENURE</u> <u>REVIEW COMMITTEES.</u>

## Faculty Member's Name: \_\_\_\_\_

\_\_\_\_\_ CWID#: \_\_\_\_

Academic Year: 20\_\_\_\_\_. Use a separate form for each academic year.

#### Please note:

•Each activity/project *requires* Division Dean approval. Faculty are advised to obtain approval prior to beginning the activity or project.

•Briefly summarize each professional activity. Hours of activity can be included on this form, but unit equivalents are determined by the PGA Committee at Foothill or the Dean of Academic Services at De Anza in accordance with past practice on the campus.

•Normally, the maximum in this category for the four-year PGA/PAA cycle is 6 quarter units. However, 9 quarter units can be awarded if at least 3 units are earned through Tenure Review Committee service. If Tenure Review Committee is used for PGA units, it cannot be used as "College or District service" under Article 38.5.

•Submit this category of PGA well before the June 1 deadline; faculty estimates of unit values may differ from those actually awarded.

#### •The faculty member must file this form with the <u>Campus Personnel Offic</u>e by

- June 1 for Step Advancement (see Appendix A, B, C.1) or for PAA (see Article 38).
- September 15 for Column Change (see Appendix A or B). To apply for a column change, file the official request form (available at the Campus Personnel Office) by June 30. Submit the completed Appendix O form(s) with appropriate documentation by September 15.

•For continued Step Advancement, nine (9) quarter units of Professional Growth activity is required by the end of the fourth year of every four-year cycle. Annual filing is recommended.

Title of Professional Activity/Project	Activity Dates	Hours	Documentation
(attach documentation/descriptions in the order of your list)			Attached

Faculty Member's Signature	Date	
, , , , , , , , , , , , , , , , , , , ,		

Dean's Signature \_

## FOR OFFICIAL USE ONLY

Date

Number of units recorded \_\_\_\_\_ Recorded by \_\_\_\_\_

Date

A copy of this form is available online at <u>http://hr.fhda.edu/\_forms.html</u> Revised 2023