

# PROFESSIONAL DEVELOPMENT SEMESTER CREDIT OPTION

For presentations conducted in CT, NJ, PA, and WI, please

Call to receive the Special Independent-Practicum enrollment packet:

# 800-479-1995

THIS FORM  
VOID IN OHIO

or complete the form below and mail to:

Dr. Allan Lifson, 729 W. 16th Street, Suite B-3, Costa Mesa, CA 92627.

## WHO MAY ENROLL

All participants...including those on district funding or release time...should be eligible to enroll since these credits are awarded entirely for practical follow-up on your own personal time after completion of this seminar. To earn each credit you will report {in three pages} on three activities developed from the seminar. Attendance at the seminar is merely a prerequisite to the academic enrollment. Complete "Teacher-Friendly"<sup>TM</sup>, step-by-step, instructions will be provided in the enrollment packet.

## CREDIT INFORMATION

Course number & title: PEDU 9008-DEVELOPING NEW IDEAS IN EDUCATION PRACTICUM. (Additional courses available for previous participants.) One, two or three semester hours, of post-baccalaureate credit...through direct enrollment with University of the Pacific, Center for Professional & Continuing Education...will be awarded upon successful completion of course requirements. The tuition is \$62.00 per credit. Practicum activities require 15 hours, per credit, of separate "Teacher-Friendly"<sup>TM</sup> follow-up. The credits are designed to meet the needs of educators for professional upgrading and salary advancement. These Professional Development Courses are specifically designed for graduate participants who are NOT pursuing an advanced degree from University of the Pacific. Acceptable where local districts approve and applicable to state licensing where authorized. Letter graded. University of the Pacific (California's oldest chartered university - 1851) is fully accredited by the Western Association of Schools and Colleges.

## FOR ADDITIONAL INFORMATION

If you have other questions, regarding the university credits, or wish to receive the special enrollment packet, please call directly to **800-479-1995**. Participants with more specific questions may ask to speak directly to Dr. Allan Lifson, Course Coordinator {800-479-1995} during the hours of 8:00 am to 12:00 noon Pacific Time. Dr. Lifson may also be reached at 949-646-9696, or by writing to:

729 W. 16th Street, Suite B-3, Costa Mesa, CA 92627.

---

**Please send me the Special Independent-Practicum enrollment packet.**

Name: \_\_\_\_\_

THIS FORM  
VOID IN OHIO

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

This is not a university course enrollment form...an enrollment packet will be sent to you by return mail.

Mail this request to: Dr. Allan Lifson, 729 W. 16th Street, Suite B-3, Costa Mesa, CA 92627.