

Pennsylvania ACT 48 Request for Hours

**ACT 48 IS ONLY ELIGIBLE IF YOU ARE REGISTERED WITH THE PDE(PENNSYLVANIA DEPARTMENT OF EDUCATION) AND HAVE AN INSTRUCTIONAL CERTIFICATE.

Name: _____

Use name on file with PDE

PDE# _____ or Social Security # _____

Address: _____

City: _____ State _____ Zip _____

District Name: _____

School Name: _____

Day Phone Number: _____

of Hours attended today: _____

Name of Seminar: _____

Evaluation attached: _____

Email: _____

Signature: _____