

PINELLAS COUNTY SCHOOLS
INSTRUCTIONAL TDE VERIFICATION FORM

I have reviewed this TDE request and I certify that this teacher has not exceeded the guideline of two TDEs per year.

This TDE exceeds the guideline of two TDEs per year, but meets a critical need.

This TDE is for critical professional development in the area of:

Principa/ Supervisor: _____ Date _____

** Please attach this form to a copy of the TDE. **