

**PROFESSIONAL GROWTH INCREMENT
SUMMARY OF ACTIVITIES**

FACULTY NAME _____

DATE _____

DEPARTMENT _____

CURRENT COLUMN & STEP PLACEMENT _____

<i>Applicants fill in this information</i>					<i>For use by PGI Committee</i>	
Item #	Brief Description or Title of Each PGI Activity	Date Completed	Policy Criteria #	Estimated PGI Unit Value	Units Allocated	Committee Notes
1						
2						
3						
4						
5						
6						
7						

8						
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FACULTY NAME _____

<i>Applicants fill in this information</i>					<i>For use by PGI Committee</i>	
Item #	Brief Description or Title of Each PGI Activity	Date Completed	Policy Criteria #	Estimated PGI Unit Value	Units Allocated	Committee Notes
9						
10						
11						
12						
13						
14						
15						

16						
17						

Page 3 (Add additional sheets if needed)

FACULTY NAME _____

<i>Applicants fill in this information</i>					<i>For use by PGI Committee</i>	
Item #	Brief Description or Title of Each PGI Activity	Date Completed	Policy Criteria #	Estimated PGI Unit Value	Units Allocated	Committee Notes
18						
19						
20						
21						
22						
23						

24						
25						
26						