**2nd Year Administrator’s Individual Development Plan Summary Tool**

To convert a 2 year Initial Practitioner’s license to a 5 year Proficient License, Upload this document in LVIS as a part of the conversion process.

**2nd Year Administrator**

Print Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­ ­­­­Date \_\_\_\_\_\_\_\_\_\_\_\_

**Affirmation from Mentor/Principal/Director/Superintendent/School Board Representative: I hereby affirm that the protégé above has successfully completed the IMAP Internship Requirements**

Print Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_

This document is a required upload in the conversion process from IP to P for School Administrators.