



2024-2025 MANDATORY FLEX DAY ACTIVITIES NONCREDIT VERIFICATION

PROCESS

Faculty – Upon attendance at activities and completion of form, submit to Professional Development Chair professionaldevelopment@noce.edu by the **May 9, 2025** designated deadline. On the first page, list and record the NOCE scheduled activities you attended and total those hours and erase hours that you did not attend that are pre-populated. On the second page, list and record any individually selected activities you attended and total those hours. The FLEX obligation is **20 hours** this academic year.

Please Print Clearly

FACULTY INFORMATION

2024-2025 Year

Last Name:	First Name:
North Orange Continuing Education Program (Circle):	<input type="checkbox"/> CTE <input type="checkbox"/> DSS <input type="checkbox"/> ESL <input type="checkbox"/> HSDP/BS <input type="checkbox"/> LEAP <input type="checkbox"/> SSSP

Mandatory FLEX Activities:

I attended the following District, campus, or external approved professional development activities:

FLEX Type	Name of FLEX Event	Ed Code/FLEX Category	Date	Hours
Mandatory Flex Day	2024 Fall NOCE Flex Day	#1, 2, B	8/8/24	5
Non Student Duty Day	Opening Day	#2, 6, G	8/9/24	3
Non Student Duty Day				
Mandatory Flex Day	2025 Spring NOCE Flex Day	#1, 2, B	1/9/25	5
Non Student Duty Day			1/10/25	

AND/OR Absence hours used and reported to the Program Office:	
TOTAL HOURS FROM THIS PAGE:	

VERIFICATION SIGNATURE

By signing this verification form, I am confirming my attendance at the above listed FLEX Day activities.

	Date
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2024-2025 MANDATORY INDIVIDUAL SELECTION FLEX ACTIVITY VERIFICATION

ACTIVITIES ATTENDED								
<i>I attended the following approved Pro D events to fulfill the mandatory individual selection FLEX hours:</i>								
Date	Activity Title	Training Purpose	FLEX Activity Category			Hours		
		Use ED Code Section 87153 Guidelines below						
<i>I designed a unique professional development activity to meet required FLEX hours and criteria (listed below). My signature below confirms this activity led to learning and instruction practices that strengthen student success.</i>								
Description of Activity								
Date of Activity		Hours of Activity	Check the category of development below					
			Program Meeting	Ed Initiative	Curriculum	Program Design	Technology	Other
		AND/OR Absence hours used and reported to Program Office:						
		TOTAL OF INDIVIDUAL ACTIVITY HOURS FROM THIS PAGE:						
		TOTAL HOURS FROM PAGE 1 & PAGE 2						
Education Code, Section 87153 Training Purposes								
[1] Improvement of teaching [2] Maintenance of current academic and technical knowledge and skills [3] In-service training for vocation education and employment preparation programs [4] Re-training to meet changing institutional needs [5] Intersegmental exchange programs [For example: transitions, retentions, persistence, etc.] [6] Development of innovations in instructional, administrative techniques, and program effectiveness [7] Computer and technological proficiency programs [8] Courses and training implementing affirmative action and upward mobility programs. [9] Other activities determined to be related to ed. and Pro D pursuant to criteria established by the Board of Governors of the CA Community Colleges, including but not necessarily limited to programs designed to develop self-esteem.								
FLEX Activity Category								
A. Course instruction and evaluation B. Staff development, in-service training and instructional improvement C. Program and course curriculum or learning resource development and evaluation D. Student personnel services E. Learning resource services F. Related activities, (student advising, guidance, orientation, matriculation services and diversity) G. Departmental or division meetings, conferences and workshops, and institutional research H. Other duties as assigned by the District								
VERIFICATION SIGNATURE								
By signing verification form, I am confirming attendance and format of Flex activities listed in each section.								
Faculty Signature						Date		
Program Associate Dean Signature						Date		

Return form to Professional Development Chair at professionaldevelopment@noce.edu by Friday, May 9, 2025.