Professional Development

This sheet must be submitted within 2 weeks of attended session to receive credit. You must attend the full scheduled session to receive credit.

Please record your professional development and return this form to Barb Callahan. Twelve (12) professional development hours. Please complete and sign the form within 2 weeks of the attended session. Make a copy for your own records.

Professional Development:
Event attended: ________________________________________________________________
Date of event: ____________________________
Hours completed: ____________________________
(Must complete Summary Reflection below.)

Staff signature: ________________________________

Summary Reflection
Must be completed for all professional development sessions to receive credit.

What new information did you learn from this session? _______________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

How will this learning impact your classroom teaching? ________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

How will this learning impact your students’ achievement? ________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Are there any follow-up sessions that could be offered from this session? Please list. 
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Revised 08/09