

USD #294 Professional Development Activity Request – GREEN FORM

Name:			
Building:			
Date of Request:			
Title of Activity:			
Location of Activity:		Date of Activity:	

Goal to be Addressed: (Write the goal this activity applies to from your Individual Professional Development Plan)

Content Endorsement and Professional Education Standards	Check one
•Workshop, seminar, conference, convention	<input type="checkbox"/>
•College Class	<input type="checkbox"/>
•Study Group	<input type="checkbox"/>
•Peer Coaching and Mentoring	<input type="checkbox"/>
•Scoring Student Assessments	<input type="checkbox"/>
•Curriculum Development and Adoption	<input type="checkbox"/>
•Partnership with Professionals	<input type="checkbox"/>
•Action Research	<input type="checkbox"/>
•Other (Please Specify):	<input type="checkbox"/>

Service to the Profession	
•Presenting workshop, conference, seminar, course	<input type="checkbox"/>
•Facilitating a Group Study	<input type="checkbox"/>
•NCA/QPA School Improvement Team Work	<input type="checkbox"/>
•Peer Coaching and Mentoring	<input type="checkbox"/>
•Committees	<input type="checkbox"/>
•Other (Please Specify):	<input type="checkbox"/>

Attach and Indicate Verification	(Check one)
•College Course Description	<input type="checkbox"/>
•Workshop Description	<input type="checkbox"/>
•Summary of Proposed Activity	<input type="checkbox"/>

Signature of Applicant _____

Signature of Building Principal _____

Signature of Building PDC Committee Member _____