Request for District Professional Development

Name(s):				
Staff Development Activity.				
Date(s):	Location:	Location:		
Anticipated Expenses.				
Registration	Meals			
Mileage/Transportation	Sub	Total		
Lodging				

Please describe the activity (workshop, seminar, in-district observation, out-of-district observation, etc.). If applicable attach any information/literature about the event.

How will your attendance improve teaching/learning in our d	istrict? What might you share with others? How and with
whom will you share what you learn?	
	Dete a l'De succet
Staff Signature	Date of Request

Approved (circle one)	Yes	No		
Supervisor Signature		Date	Director of Instruction Signature	Date

I understand that by accepting district funds will obligate me to share information with others.