

Out-of-District Professional Development Request

To complete this process: type or copy / paste information into the lines / boxes; print the form; sign below; gain approval from administrator (signature); and submit to OIS.

Faculty Member Name / Date: _____

Professional Development _____

Experience: _____

Sponsoring Institution: _____

Dates / Times: _____

Total Hours of Professional _____

Development: _____

Description of Activity:

Activity Relevance to Grade /
Course / Position:

Connection to District /
Building / Personal Goals

Faculty Member Signature: _____

Director / Principal Signature: _____

Committee Decision: _____

* A certificate of completion is required for all Out-of-District Professional Development. For approved opportunities (e.g., online webinars) that do not provide a certificate of completion, a written reflection summarizing the professional development experience and indicating the specific application to one's current assignment can be submitted. The reflection needs to be ***one page per hour submitted in length with professional formatting*** (i.e., 12-size Times New Roman font, double-spaced, and standard margins).