

Professional Development Reflection Form

This form is for professional development documentation for non-college/university and non-transcript activities. Attach a copy of the activity verification (agenda, course description, certificate of attendance, book summary, etc.) and keep in your PDP file.

Last Name: _____ First: _____

Last 4 digits of S.S. #: _____ Building: _____

Workshop Date: _____ Contact Hours _____ CEUs _____

Activity/Workshop Title: _____

Describe the activity:

What did you learn from this activity?

How does this activity support your goals for professional development?

Signature _____ District Representative Signature _____

LPDC Signature _____ Date _____

_____ Activity Verification attached

_____ Approved for _____ CEUs _____ Contact Hours