

District Professional Development Committee Profile and Sign-Off Sheet

Please write all of your responses for the district professional development plan on the template. You will want to refer to the guidance document for an explanation of each of the sections in the plan and for a list of helpful tools and resources in the Collaborative Professional Learning in School and Beyond tool kit.

SECTION DISTRICT PROFILE

1

Name of District: _____

District Code: _____ County Code: _____

District Address: _____ County _____

District Factor Group: _____

Chief School Administrator: _____ Date submitted _____

Type of District (check one):

K-5 K-6 K-12 7-12 9-12 Other (specify): _____

Please provide the following information:

List the names of the school buildings, grades, current student enrollment and number of professional staff members (who hold instructional or educational services licenses):

NAME OF BUILDING	SCHOOL CODE	GRADES	STUDENT ENROLLMENT	STAFF MEMBERS

Please provide the following information for the District Professional Development Committee:

Chair:

Chair Name (please print) _____ Signature _____ Position _____ Term Expires _____ Email _____

Name (please print) _____ Signature _____ Position _____ Term Expires _____ Email _____

Name (please print) _____ Signature _____ Position _____ Term Expires _____ Email _____

Name (please print) _____ Signature _____ Position _____ Term Expires _____ Email _____

Name (please print) _____ Signature _____ Position _____ Term Expires _____ Email _____

Name (please print) _____ Signature _____ Position _____ Term Expires _____ Email _____