

School Professional Development Committee Profile and Sign-Off Sheet

Please write all of your responses for the school 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 SCHOOL PROFILE

1

Name of School: _____

School Address: _____

Principal: _____ E-mail _____ Phone _____

Grade Levels: _____ Student Enrollment: _____

Staff (provide number of staff members in each category):

Teachers: _____ Content Area _____ Special Education _____ Special Area Teachers (Arts, Phys. Ed, Tech)
_____ Education Services Personnel (child study, guidance, library, speech, therapists, nurses, etc.)
_____ Paraprofessionals

Administrators: _____

Date submitted _____

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

Chair:

Chair Name (please print)	Signature	Position	Term Expires	Email
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