School Excellence Team
Professional Development Request
2011-2012

Name _____________________________________________ Building ______________________ (Last, First)

Role in Building ________________________________________________________________

Professional Development request: (check as appropriate)
  o Conference/Seminar/Event
    (Title, location, dates – attach flyer)
  o Substitute for Peer Coaching
  o Substitute for Team Planning
  o Substitute for online webinar/conference
    BOCES Workshop?
      YES
      NO
  o Other ________________________________________________________________
    (Title, location, dates – attach flyer)

Will this Professional Development opportunity assist in meeting the goals of the building’s SET?
  Yes ______ No _____

Describe the purpose for attending the conference/seminar/event. Include details about how this professional development opportunity will assist in meeting the building’s SET goals, and/or contributes to the initiatives of the district or building:
___________________________________________________________________________
___________________________________________________________________________

Describe what you will do to contribute to the professional development of the building as a result of this opportunity. (Presentation to building staff, Exhibit H workshop, involvement on SET or committee, development of a course/program, etc.)
___________________________________________________________________________
___________________________________________________________________________

Monetary request (registration, mileage, other):
___________________________________________________________________________
___________________________________________________________________________

Request reviewed by the SET on _________________________________.

Request Approved _____
Request Denied _____
Request sent back for more information _____

SET signatures:

_____________________________________________ ________________________
Principal Date

_____________________________________________ ________________________
Treasurer of SET (designated by SET) Date

If the professional development opportunity is approved by the SET, the District Conference and Travel Authorization Form must be completed and submitted to the building principal.