PERSONAL PROFESSIONAL DEVELOPMENT REQUEST

NAME(S):
TITLE OF WORKSHOP/CONFERENCE
EARLY REGISTRATION DEADLINE DATE REGISTRATION DEADLINE DATE
EARLY REGISTRATION COST REGISTRATION COST
CONFERENCE WEBSITE
DATE(S) OF WORKSHOP/CONFERENCE
SUBSTITUTE TEACHERS NEEDED? YES NO
IF YES, LIST DATE(S)
LODGING NEEDED? YES NO HOW MANY NIGHTS?ESTIMATED COST
FLIGHT NEEDED? YES NO ESTIMATED COST
SELECT THE STRATEGIC OBJECTIVE(S) MOST CLOSELY ALIGNED WITH THIS PROFESSIONAL
DEVELOPMENT OPPORTUNITY
☐ Strengthen coordination and collaboration between ESL and ASE programs to increase and accelerate student achievement.
\square Equip students for their transition into college and/or career. (workforce)
☐ Incorporate 21 st Century skills across curriculum to improve teacher and student use of technology.
Other: (explain)

Provide a brief narrative explaining how this professional development opportunity supports our professional practice and/or student learning goals in connection with our WASC Action Plan and/or ACCEL goals.