

READING COMMUNITY CITY SCHOOL DISTRICT

Form B

Professional Development Activity sheet (PDAS)
(To be completed After Event)

Name _____

Type of Activity _____ actual value _____ PDU's _____

Beginning and ending dates _____

Respond to the following statements:

I. How will you implement the activity?

II. Attach any other relevant documents, for example, agenda, reflections, certificate of attendance.

I certify that information provided in this activity documentation is accurate to the best of my knowledge.

Educator's signature _____

Date received by LPDC _____

_____ Approved _____ Rejected

Approved for _____ PDU's _____

LPDC signature: _____