

PROFESSIONAL DEVELOPMENT TRAINING/WORKSHOP REQUEST FORM

(Please complete all required (* asterisked) fields to avoid delay in processing of request.)

***Title of Workshop:** _____

***Description:** _____

***Event Type:**

☐ Board Meeting

☐ Professional Development

☐ Executive Committee Meeting

☐ Teacher Center Committee Meeting

☐ Online Course

☐ Other

***Credit Type:**

☐ CEU (College Credit)

☐ Graduate Hours

☐ Other

☐ Staff Development Hours

***Strand: (Check all that apply)**

☐ Advocacy/Leadership

☐ AR History

☐ Collaborative Learning Comm.

☐ Educational Technology

☐ Instructional Leadership

☐ Non-Curricular

☐ Student Health & Wellness

☐ AR Content Standards/Frameworks

☐ Classroom Management

☐ Curriculum Alignment

☐ Fiscal Management

☐ Instructional Strategies

☐ Prin. of Learning & Dev

☐ Supervision

☐ Assessment

☐ Cognitive Research

☐ Data Disaggregation

☐ Health/Physical Activity

☐ Mentoring/Coaching

☐ Private Event

☐ Systemic Change Process

Subject: (Check all that apply)

☐ Adult Education

☐ Language Arts

☐ Social Science

☐ All Subjects

☐ Literacy

☐ Technology

☐ Business Ed.

☐ Math

☐ Career Readiness & Work Based Learning

☐ ELL

☐ Mental Health & Wellness

Audience: (Check all that apply)

☐ Administrators

☐ Instructional Leaders

☐ Technology Coordinators

☐ All Educators

☐ Para Pros

☐ Staff

☐ Assistant Principals

☐ Principals

☐ Counselors

☐ Reading Recovery

Facilitator: _____ **Fee:** _____ **Billing:** ☐ ESCWorks ☐ Bookkeeping

***Number of Participants:** _____ ***In person** ☐ (Meeting Room: _____) ***Virtual**

(If virtual ***Zoom will be created by:** ☐ AALRC ☐ Presenter) ☐ Private Event

***Workshop Date(s):** _____ ***Time:** _____

***Credit Hours:** Total Credit Hours: _____ ☐ Full Day Workshop ☐ Half Day Workshop ☐ Multiple Days

***Presenter(s):** _____

Credit and Amount:

☐ Advanced Placement _____

☐ Data Disaggregation _____

☐ Health/Physical Activities _____

☐ Arkansas History _____

☐ Fiscal Management _____

☐ Instructional Leadership _____

☐ Arkansas Scholarship _____

☐ Educational Technology _____

☐ Parental Involvement _____

Additional Comments/Information: _____