

RUMSON SCHOOL DISTRICT
Rumson, New Jersey

Professional Day Follow-up Report

Print Name: _____ Date: _____

In order to make better use of the experiences gained by teachers, administrators and staff who were approved to attend an out-of-district professional day workshop, seminar or conference, and to satisfy the new requirements set forth by the State of New Jersey, please complete this form and return one copy to the Supervisor of Curriculum, **no later than five [5] days** following a professional day.

A. Professional Day Information

1. Event Attended: _____

Location: _____ Date: _____

2. Attach the agenda/program and copies of any interesting handouts distributed to attendees.
3. Please attach a brief summary of the main theme of the workshop and describe how it might be applied in your classroom or assignment.
4. Please provide the name of any outstanding speaker or discussion leader who should be considered for in-service work in our district.

Name: _____

Contact details: _____

5. If this particular workshop/conference is repeated in the future, would you recommend that our district be represented again: Yes No [please circle one]

B. Professional Day Turnkey Training

1. How are you planning to share the information gained on your professional day with colleagues?

| | | | |
|----------------------|-------|--------------------------|-------|
| Faculty Meeting | _____ | Grade Level Team Meeting | _____ |
| Subject Area Meeting | _____ | Principal's Cabinet | _____ |
| District Workshop | _____ | | _____ |

2. Additional Comments: _____

cc: Supervisor of Curriculum