

HLC Accreditation Evidence

 Professional Development Request and Reporting Forms

URL:

https://internal.bartonccc.edu/resources/forms

Office of Origin:

Vice President of Instruction

Contact(s):

- Associate Dean of Instruction
 - Coordinator of Employee Education and Engagement

Professional Development Request Form

This form is to be submitted when funds are needed to participate in any type of Professional **Development Opportunity.**

Hi, Cathie. When you submit this form, the owner will see your name and email address.

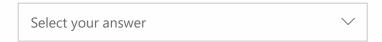
- * Required
- 1. First and Last Name *

Enter your answer

2. Primary Location/Instructional Method *



3. Supervisor *



4. Supervisor's Full Email *

	Enter your answer	
	Title of Professional Development Opportunity *	
5.	Title of Professional Development Opportunity *	
	Enter your answer	
6.	Location of Event *	
	Enter your answer	
ı		
7.	Event Start Date *	
	Please input date (M/d/yyyy)	:::
0	French Find Data *	
ŏ.	Event End Date *	
	Please input date (M/d/yyyy)	:::
0.	Will you need additional days for travel? *	
9.	Will you need additional days for travel? *	
	Yes	
	○ No	

10. How many additional days?

	Enter your answer
11	Designation Foot
11.	Registration Fee *
	Enter your answer
12.	Travel-Airfare/Taxi *
	Enter your answer
1	
13.	Lodging *
	Enter your answer
11	Facel *
14.	Food *
	Enter your answer
16	Will you be using funds from any of the following areas? *
15.	Will you be using funds from any of the following areas? *
	Grant Funding
	Perkins Funds
	College Funds
	Personal Funds
	Fund Raising

Inter your answer 16. What amount of funds? * Enter your answer 17. Is this opportunity required for your position? * Yes No 18. If yes, explain how this opportunity is mandatory. Enter your answer 19. Provide a description of the opportunity: * Enter your answer 20. Who will benefit from the information you acquire? *	_	Department Funds
17. Is this opportunity required for your position? * Yes No 18. If yes, explain how this opportunity is mandatory. Enter your answer 19. Provide a description of the opportunity: * Enter your answer		None
17. Is this opportunity required for your position? * Yes No 18. If yes, explain how this opportunity is mandatory. Enter your answer 19. Provide a description of the opportunity: * Enter your answer	16. '	What amount of funds? *
 Yes No 18. If yes, explain how this opportunity is mandatory. Enter your answer 19. Provide a description of the opportunity: * Enter your answer 20. Who will benefit from the information you acquire? * 		Enter your answer
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No 18. If yes, explain how this opportunity is mandatory. Enter your answer 19. Provide a description of the opportunity: * Enter your answer 20. Who will benefit from the information you acquire? *	17. I:	s this opportunity required for your position? *
18. If yes, explain how this opportunity is mandatory. Enter your answer 19. Provide a description of the opportunity: * Enter your answer 20. Who will benefit from the information you acquire? *	(Yes
19. Provide a description of the opportunity: * Enter your answer 20. Who will benefit from the information you acquire? *	(○ No
19. Provide a description of the opportunity: * Enter your answer 20. Who will benefit from the information you acquire? *		
19. Provide a description of the opportunity: * Enter your answer 20. Who will benefit from the information you acquire? *	18. l	
Enter your answer 20. Who will benefit from the information you acquire? *		t yes, explain how this opportunity is mandatory.
Enter your answer 20. Who will benefit from the information you acquire? *		
20. Who will benefit from the information you acquire? *		
	19. F	Enter your answer
	19. F	Enter your answer Provide a description of the opportunity: *
Enter your answer	19. F	Enter your answer Provide a description of the opportunity: *
		Enter your answer Provide a description of the opportunity: * Enter your answer

21. How do you plan to inc	orporate the ne	w information	into your	program,
curriculum and/or posit	ion? *			

Enter your answer

Submit

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Professional Development Reporting Form

This form is to be submitted after completing a Professional Development Opportunity.

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	Hi, Cathie. When	you submit this form	, the owner will see	your name and email address
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- * Required
- 1. Participants First and Last Name *

Enter your answer

2. Primary Location *

Select your answer



Enter your answer

4. Title of Professional Development Opportunity *

Enter your answer

Enter your answer	
. Was this Professio	nal Development Opportunity required? *
Yes	
○ No	
. If yes, explain why	this opportunity was required.
Enter your answer	
Enter your answer	
	from any of the following areas? *
	from any of the following areas? *
. Did you use funds	from any of the following areas? *
5. Did you use funds Grant Funding	from any of the following areas? *
B. Did you use funds Grant Funding Perkins Funds	from any of the following areas? *
B. Did you use funds Grant Funding Perkins Funds College Funds	from any of the following areas? *
Grant Funding Perkins Funds College Funds Personal Funds	

Opportunity. *

	Enter your answer
٥. ١	Who benefited from the information you acquired? *
	Enter your answer
L	
	What action(s) will you take in response to your participation in the Professional
ا	Development Opportunity? *
	Enter your answer
L	
2.\	What is your overall evaluation of this opportunity? *
(Excellent
(Good
(○ Average
(Poor
(○ Fair
`	
	Submit

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