Substitute Professional Learning

NEW PL ENROLLMENT FORM

Effective January 5, 2015
PLEASE PRINT CLEARLY

YOUR NAME: 

PHONE WHERE YOU CAN BE REACHED: 

EMAIL: 

INDICATE TYPE OF WORKSHOP: 

CONDUCTED BY COORDINATOR(S) 

SCHOOL-BASED PL 

DATE OF PL: 

TIME OF PL (begin and end range): 

(Must be a minimum of 2 hours to count for DDP.) 

TYPE OF MEETING (PL DESCRIPTION): 

LOCATION: 

FACILITATOR (s) or COORDINATOR(s): 

IF THE PL IS SCHOOL-BASED, ARE YOU A SUB AT THAT SCHOOL? 

YES  NO  (If NO, then you are not eligible.) 

WHAT IS THE RSVP DEADLINE? 

DIRECTIONS: Complete the form above and make a photocopy. Retain one copy and send the other copy to the PL Facilitator/Coordinator in order to enroll in the PL. Take your copy with you to the PL and have the PL facilitator or coordinator provide verification that you have attended. Once completed, the entire form must be submitted to Annette Powell at the Central Office in order to receive credit toward Differential Daily Pay (DDP) – if you are eligible. (Retain a copy.)

PROFESSIONAL LEARNING ATTENDANCE VERIFICATION:

As the facilitator/coordinator/instructor/administrator responsible for the PL above, I hereby verify that the substitute named above has attended the entire PL identified. I also understand that this may result in increased pay should be substitute be eligible for DDP.

__________________________________________________________________________

(Signature of Facilitator/Coordinator/Administrator)  ________________________________

(Date)

RETURN Verified Forms to ANNETTE POWELL @ the Central Office within 3-weeks of PL