

RCTL Professional Development Contact Form 2009-2010

Trainer(s): _____

County(ies): _____ Date(s): _____

School/Location(s): _____ Topic: _____

<p>1. Length of Services</p> <p style="text-align: center;">_____ hours (rounded to nearest .5 hours)</p>	<p>2. Group Demographics</p> <p>_____ # of elementary teachers _____ # of middle school teachers _____ # of high school teachers _____ # of administrators _____ # of other</p> <p>Total number of participants: _____</p>												
<p>3. Primary Service Provided (check 1)</p> <p><input type="checkbox"/> Training</p> <p><input type="checkbox"/> Consulting</p> <p><input type="checkbox"/> Coaching</p> <p><input type="checkbox"/> Observing</p> <p><input type="checkbox"/> Follow-up visit</p>	<p>4. Focus of Service (check 1)</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Interventions</td> <td><input type="checkbox"/> Literacy Instruction</td> </tr> <tr> <td><input type="checkbox"/> Assessment</td> <td><input type="checkbox"/> Math Instruction</td> </tr> <tr> <td><input type="checkbox"/> Standard Based Lessons</td> <td><input type="checkbox"/> Writing Instruction</td> </tr> <tr> <td><input type="checkbox"/> School Improvement</td> <td><input type="checkbox"/> S. Studies Instruction</td> </tr> <tr> <td><input type="checkbox"/> T4S</td> <td><input type="checkbox"/> Science Instruction</td> </tr> <tr> <td><input type="checkbox"/> PLCs</td> <td><input type="checkbox"/> Other: _____</td> </tr> </table>	<input type="checkbox"/> Interventions	<input type="checkbox"/> Literacy Instruction	<input type="checkbox"/> Assessment	<input type="checkbox"/> Math Instruction	<input type="checkbox"/> Standard Based Lessons	<input type="checkbox"/> Writing Instruction	<input type="checkbox"/> School Improvement	<input type="checkbox"/> S. Studies Instruction	<input type="checkbox"/> T4S	<input type="checkbox"/> Science Instruction	<input type="checkbox"/> PLCs	<input type="checkbox"/> Other: _____
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<p>Please attach form to sign-in sheet and evaluations if primary service was training.</p> <p>Date Submitted _____</p>													

GUIDELINES TO USING CONTACT FORM:

1. **Groups** (such as T4s) that are overseen or run by one particular trainer or program coordinator would be tracked by the **lead person only**.
2. **For classes that are part of a series**, you will only need to fill out **one** form for the whole series, and just list all of the dates at the top.
3. If a trainer outside of RPDP is utilized, do **not** fill out a form on their training.