

Glen Ridge Public School

Professional Development Evaluation Form

Staff Member: _____
(Print Name)

Date: _____

Workshop/Conference Title: _____

Presenter(s): _____

Subject Area/Specific Topic: _____

Grade Level: _____

Overall Evaluation of the workshop/conference: _____

What information from this workshop would be valuable for other staff members? How do you plan to share this information?

How is the information from the workshop valuable/applicable for Glen Ridge students? How do you plan on utilizing this information with your students?

Received: _____
Administrator

Date: _____