

## Breathitt County Schools PD Evaluation Form

Name: \_\_\_\_\_ Home School: \_\_\_\_\_

Trainer: \_\_\_\_\_ Topic: \_\_\_\_\_

Location: \_\_\_\_\_ Date: \_\_\_\_\_ Time of training: \_\_\_\_\_ # of Hours: \_\_\_\_\_

Check one of the following: PD Credit \_\_\_\_\_ Stipend \_\_\_\_\_ EILA \_\_\_\_\_

Please check the content addressed below.	
Reading _____	Foreign Lang. _____
Continuous Asmnt _____	Analyze Student Work _____
Non-Academic _____	LEP _____
Classroom Mgnt _____	Tech for Instruction _____
Tech in Content _____	Classroom Asmnt _____
Language Acquisition _____	Mathematics _____
Instruct-LEP _____	Instruct-Disabled _____
Instruct-Gender _____	Instruct-Race _____
Instruct-Poverty _____	Cultural Responsible _____
Parent Involvement _____	Writing _____
Practical Living _____	Vocational Studies _____
Science _____	Social Studies _____
Instruct-Strategies _____	Arts & Humanities _____

PD Standards Codes
___ Acad-Curriculum
___ Acad-instruction
___ LearnEnv-Communit
___ Eff-Leadership
___ Eff-Planning
___ Acad-Classroom
___ LearnEnv-School
___ LearnEnv-Prof. Dev.
___ Eff-Structure

OFFICE USE ONLY
Request on File <input style="width: 50px; height: 20px;" type="checkbox"/>

**Please answer the following questions.**

1. What was the most valuable part of the session for you?
  
2. What suggestions do you have for this session?
  
3. What additional topics for PD do you want or need?

Please rate the following components of this session. Scale: 1-5 (1 being lowest and 5 being the highest)	
Clarity of Presentation: <input style="width: 80px; height: 25px;" type="text"/>	Value: <input style="width: 80px; height: 25px;" type="text"/>
Knowledge of presenter: <input style="width: 80px; height: 25px;" type="text"/>	

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal/Trainer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_