

Post-Conference Report Template

Employee Information

Name: _____ Job Title: _____

School/Department: _____

Conference Overview

Conference Name: _____ Conference Dates: _____

Conference Location: _____ # of Professional Learning hours _____

Conference Objectives

What were the primary objectives of the conference? (Check all that apply)

- ☐ Professional development and training
- ☐ Networking and collaboration with peers
- ☐ Sharing best practices and innovative strategies
- ☐ Improving student outcomes and achievement
- ☐ Other (please specify) _____

Did the conference meet these objectives? Yes / No

Takeaways and Key Messages

What were the most important takeaways from the conference? (Limit to 3-5 key points)

- _____
- _____
- _____
- _____
- _____

Evaluation and Assessment

How would you rate the overall effectiveness of the conference? (Excellent - Good - Fair - Poor)

What determined the rating above? What was great? What could use some improvement?

Action Plan and Implementation

What actions will you take as a result of attending this conference?

- Provide specific examples of changes you will make in your practice, such as new instructional strategies or approaches.

- _____
- _____
- _____

- Identify any additional resources or support needed to implement these changes.

- _____
- _____
- _____

- By when will you implement these changes? _____

Conclusion

In summary, what were the most important outcomes or benefits of attending this conference?

- _____
- _____
- _____
- _____
- _____

How do you plan to sustain and build upon these outcomes in your practice?

- _____
- _____
- _____
- _____
- _____

Additional Comments or Recommendations

Is there anything else you would like to add or recommend regarding this conference?

- _____

Employee Signature

I hereby certify that the information provided in this report is accurate and complete to the best of my knowledge.

I understand that SMCPS employees are responsible for submitting a Transfer Credit Request in Professional Learning if they wish to have Professional Development Points (PDP) for conferences added to their Professional Learning PDP Transcript.

Signature: _____ Date: _____

This template is designed to help SMCPS employees provide a detailed and comprehensive report on their conference attendance, including their objectives, takeaways, action plan, and evaluation. The report should be submitted to your supervisor or administrator within 10 days after returning from the conference.

Administrator/Supervisor Signature

I have reviewed the information provided in this report.

Signature: _____ Date: _____