

ROBERTSON COUNTY SCHOOLS
PROFESSIONAL DEVELOPMENT WEBINAR REFLECTION RECORD
(must be submitted within 2 weeks of the training date)

NAME: _____ SCHOOL: _____

ACTIVITY TITLE: _____

VIEWING TIME & DATE: _____ VIEWING LOCATION: _____

In order to receive PD credit, online professional development must be completed outside of the contract day. During the training, please take a screenshot showing your attendance and the date and time displayed in the bottom-right corner of your screen. Attach the screenshot and your certificate to your Webinar Reflection Form and submit to the Federal Programs Department.

To be completed for teacher and school requests

Implementation Strategies – Indicate specific information gained to add to your professional growth *and* how you will translate this learning to your students in your classroom.

Documentation/Follow-Up – Indicate what specific methods you will use to ensure the information from the professional growth activity has an ongoing impact on student learning or school culture . (What strategies will be observable in your classroom?)

Effectiveness / Evaluation – Indicate the specific measures that will be used to evaluate the effectiveness of the professional growth activity. How will you document the impact of your implementation with your students? (formal or informal data source)

IMPLEMENTATION STRATEGIES _____

DOCUMENTATION / FOLLOW-UP _____

EFFECTIVENESS / EVALUATION _____
