



PAWNEE COMMUNITY UNIT SCHOOL DISTRICT #11

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Pawnee CUSD #11 Professional Development Report

Title of Workshop or Program Attended:

Presenter: _____ Date: _____

Briefly, describe the most important information gained at this workshop program.

How will you use this information in your classroom or at school?

What ideas or suggestions did you learn that could be used by other staff members at school?

Would you recommend this workshop/program to other staff members? Why?

Name: _____ Date submitted: _____

This report may be shared with the Administration, Board of Education and other staff members. A copy of the report will be stored in our professional development file.