**Facilitator Application**

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| Full Name: | Click here to enter text. | Click here to enter text. | Click here to enter text. | Date: | Click here to enter text. |
|  | *Last* | *First* | *M.I.* |  |  |

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| Building Assignment : | Click here to enter text. |  |
|  |  *Title Building Street Address* |  |

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|  | Click here to enter text. | Click here to enter text. | Click here to enter text. |
|  | *City* | *State* | *ZIP Code* |

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| Phone: | Click here to enter text. | Email: | Click here to enter text. |

Select the time frame that best fits your anticipated presentation time.

**Length of Presentation:** [ ] 2 Hours [ ] 3 Hours

Select the date(s) that best fits your preference.

**Proposed date of Presentation:** Click or tap here to enter text.

**Proposed Start and End Time:** Click here to enter text.

**Title of Proposal:** Click here to enter text.

# Proposal Overview: Who should attend your session? What are the Learning objectives? What will Educators do? What will they learn? How will this session influence Educators teaching strategies?

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| Click here to enter text. |

# Content: What content will be addressed?

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| Click here to enter text. |

**Proposal Process:** How will participants experience the content? How will you engage the audience?

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| Click here to enter text. |

# Participant Outcomes: List 2-4 intended outcomes.

# What do you hope educators take away from this training? What will they know? What will they be able to do? How might they apply the knowledge as a result of attending the session?

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| Click here to enter text. |

**Resources:** Provide all resource information here. (Book Titles, Link Address, etc.)

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| Click here to enter text. |

Please Summit Complete Application to Ms. Barbara Sharp by way of email at BSHARP@RGSD.K12.MO.US and Ms. Darion Hopkins at DHOPKINS@RGSD.K12.MO.US.