

Professional Development Activity Approval Request Form

Name	Address, City, State
e-mail	Phone

Indicate which category applies to you: Individual educator ___ School District ___
PD Consultant ___ College/University ___

Course Summary

Course Title: _____ Observation Activity _____

Course Description:

Teacher will observe the 2nd grade classroom utilizing The Daily Five. After observations and meeting with the 2nd grade teacher afterwards, teacher will be able to implement or better utilize this program in her own classroom

Date of Activity: _____ Location: _____

Professional Development Time: _____ Hours _____ Minutes

Indicate from the following which **National Professional Learning Standard** (<http://learningforward.org/standards-for-professional-learning>) this Professional Development aligns to: (check all that apply)

- This activity made use of **Learning Communities** committed to continuous improvement, collective responsibility, and goal alignment.
- This activity shared **Resources** to increase educator knowledge base.
- This activity shared **Learning Designs** to improve knowledge of theories, research, and models of human learning to achieve its intended outcomes.
- This activity focused on using **Outcomes** that increases educator effectiveness and results for all students.
- This activity focused on **Leadership** that develops capacity, advocates, and create support systems for professional learning.
- This activity focused on using **Data** from a variety of sources to plan, assess, and evaluate professional learning.
- This activity focused on sustained **Implementation** of procedures and practices to promote long-term change.

Provide a rationale as to how this Professional Development aligns to the state approved National Standards for professional learning selected above:

Educator develop a vision and strategic plan for effective learning. Educator is engaging in his/her own professional learning and developing effective relationships and communication between grade levels. Educator is securing whole system accountability for student success.

Indicate from the following which your Professional Development aligns to: (check all that apply)

- Increase the knowledge and skills of school and district leaders who guide continuous professional development.
- Will lead to improved learning for students.
- Addressed the organization of adults into learning communities whose goals are aligned with those of the school and district.
- Deepen educator's content knowledge in one or more content (subject) areas.
- Provide educators with researched-based instructional strategies to assist students in meeting rigorous academic standards.
- Prepare educators to appropriately use various type of classroom assessments.
- Use learning strategies appropriate to the intended goals.
- Provide educators with the knowledge and skills to collaborate.
- Prepare educators to apply research to decision-making.

Indicate which of the following statement(s) are addressed by this professional development activity:

- Activities are of a type that will engage participants over a sustained period of time allowing for analysis, discovery, and application as they relate to student learning, social or emotional achievement, or well-being.
 - Professional development aligns to the licensee's performance.
 - Outcomes for the activities relate to student growth or district improvement.
- and**
- Activities align to State-approved standards for professional learning
 - Professional Development Standards
 - Illinois Content Area Learning Standards
 - Professional Educator Standards
 - Illinois Professional Leader Standards
 - This activity was higher education coursework.

Produce a rationale for the activity that explains how it aligns to the state learning standards:

This activity will allow educator to apply what they learned from observation to effective instruction and implementation of The Daily Five in their classroom.

Please Sign and Date (Include Title/Position)

*Submit to your _____ no later than thirty days prior to workshop.

*If approved, evidence of completion form will be issued upon receipt of ISBE form 77-21A (Evaluation form), sign in sheet, agenda, and payment of provider fees established by the office. Inquire with ROE or ISC for listing of provider fees.