



# SELF-DIRECTED PROFESSIONAL DAY INTENTION FORM

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Provided the teaching staff has been notified of the school organized activity, please fill out this form and submit it to the designated school administrator at least **30** days before the scheduled professional development day.

or

If less than 30 days notice of the school organized activity is provided to the teaching staff, submit as soon as reasonably possible after the teaching staff have been notified.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_

Pro D Day: \_\_\_\_\_

Description of the Proposed Self-Directed Professional Development Day Activity:

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Benefit of the Proposed Self-Directed Professional Development Day Activity:

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Location of the Proposed Self-Directed Professional Development Activity: \_\_\_\_\_

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To Be Completed by School Administrator

Agreed

Not Agreed

If not agreed, provide reason below:

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The Administrator will communicate the decision to not agree to the teacher and school staff representative prior to the scheduled Professional Development Day.*