



2012-13 Catapult Learning

Professional Development and Family Involvement Workshop Request Form

Name of Requester _____ **Today's Date:** _____

Title _____ **Email Address** _____

School Name _____ **Phone Number** _____

Address _____ **City/Zip** _____

Grade Levels Attending _____ **Number of Participants** _____

Are you willing to host this or any other workshop at your school site for other schools/Title I teachers to attend? ☐ Yes ☐ No

If yes, how many persons can your site accommodate? _____

Audio Visual Equipment and Other Materials Available at Your School for the Presenter:

☐ LCD Projector ☐ Laptop Computer ☐ DVD Player ☐ Hand Held Mic

☐ CD Player ☐ Chart Paper

**Please Make Your Professional Development and Family Involvement
Selections on the Back**



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Professional Development Options

- ❖ ASCD Online Professional Development Annual License
- ❖ Catapult Workshops (see list below for possible topics)
- ❖ Customized Workshop (topic selected by principal)
- ❖ Lending Library (Initial Library or Upgrade Materials)

Please select your 1st and 2nd Professional Development option from above
(Review Workshop Topics Attached):

PD First Choice _____ **Requested Date** _____

If workshop – list the start and end time for the 3 hour seminar

Start Time _____ End Time _____

PD Second Choice _____ **Requested Date** _____

If workshop – list the start and end time for the 3 hour seminar

Start Time _____ End Time _____

Family Involvement Options

- ❖ Family Involvement Workshops
- ❖ Student Reading Bags
- ❖ Family Reading Bags

Please select one Family Involvement option from above (Review Workshop Topics Attached):

FI Choice _____ **Requested Date** _____

If workshop – list the start and end time for the 3 hour seminar

Start Time _____ End Time _____