



## Professional Development Log\*

Instructional Resource Professional

Teacher Name \_\_\_\_\_ School \_\_\_\_\_

Program \_\_\_\_\_ Evaluation Year \_\_\_\_\_

Professional Development Activity	Date	Location	Evidence of Satisfactory Completion Received
			<input type="checkbox"/> Grade <input type="checkbox"/> Certificate <input type="checkbox"/> Other _____
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\* This may be submitted by assessing your professional development record in My PLT.