Westford Public Schools **Professional Development Points (PDP) Request Form**

This form is to be completed and submitted to the building principal, curriculum coordinator (if applicable), then to the Assistant Superintendent of Curriculum & Instruction for approval *prior* to starting a task/project that may qualify for the distribution of PDPs. Please note projects/tasks that have less than 10 contact hours will receive a Certificate of Contact Hours, not PDPs. These certificates can later be bundled (by groups of 10 hours) to convert to PDPs at the state level. For more information regarding the PDPs requirements, visit http://www.doe.mass.edu/pd/faq.html

Name:	School:	Date:
Position:	Department:	
Task/Project Name:		
Task Objective:		
	Task/Project for PDPs (count yourself):	
Total Number of Contact Hours: Date(s)/Time of Meeting(s):		
Describe contact hours (e.g. webinar	[be specific], face-to-face mtg with present	er, etc.):
Digital Learning Plan Goals Personal Ed Eval Goals	fessional development address (check a District Strategic Plan MA Curriculum Frameworks areas checked above:	School Improvement Plan Goals,DESE Requirement
What "end product" do you plan to sfrom the professional development?	submit to demonstrate the application of	f the skills/practices that you learned
Staff Member Signature:	Dat	e:
	nda, minutes, and product must be submitted to	
	(if applicable):	
Principal/Designee Approval:		Date:
Assistant Superintendent Approva	1:	Date: