

# Professional Development Form



# JOHN CALVIN CHRISTIAN COLLEGE

*My heart I offer to You Lord - promptly and sincerely*

This form is to be used for all PD activities that teachers are involved in. The purpose of the form is to ensure balance in dividing PD time amongst staff, to keep an appropriate record of the PD activity of staff and to be able to assess the cost of PD across the College.

Please complete and send to Tia Venter, by email. (Do not use hard copies). An answer will be provided within one working day of submitting item.

**Teacher:**

**Learning Area:**

**I wish to attend/have attended the following PD activity:**

**Activity:**

**Date(s):**

**Run by:**

**Time (hours):** from  **till**

**Total Hours:**

**Cost of Activity (not including wages and / or relief):** \$

**Relief Required:** Yes

No

**LAC Approval:** Yes

No

**Approved:** Yes

No

**If Not Approved Reason:**

**Head of School:**