| Course 1 | <u>Number</u> | Section Number | Component Number | Start Date | End Date | Start Time | End Time |
|----------|---------------|----------------|------------------|------------|----------|------------|----------|
|          |               |                | 8 501 003 C      |            |          |            |          |

## INSERVICE WORKSHOP INSTRUCTOR

To request inservice points for an instructor, the supervisor of the workshop instructor must complete this form to verify evidence of the workshop instructor's learning. An inservice instructor can earn inservice credits for presenting a specific workshop (one time per validity period) and only for the number of credits that match the number of hours of the workshop (excluding one hour for lunch).

| Instructor's Name  | _ Employee ID/Alt ID# | School_   |  |  |  |  |  |  |
|--|-----------------------|---|--|--|--|--|--|--|
| Title of Inservice   |                       |   |  |  |  |  |  |  |
| Inservice Location   |                       |   |  |  |  |  |  |  |
| I have analyzed the participant evaluations and opinion surveys gathered from this workshop. According to these responses, this workshop instructor successfully presented the above mentioned inservice for a total of hours. |                       |   |  |  |  |  |  |  |
| Verified by:  Signature of Person Responsible for Instructor's Evaluat   |                       |   |  |  |  |  |  |  |
| Records must be received by Professional Learning and Development within the school year when activity occurs.   |                       |   |  |  |  |  |  |  |
| Activity Approval  |                       | service Points Can Be Awarded for This Inservice              |  |  |  |  |  |  |
| Approved   | Approved              |   |  |  |  |  |  |  |
| Signature of Principal, Department Head, or Designed Requester must retain a copy of this evaluation for five (5) years.   | e                     | Signature of Director of Professional Development or Designee |  |  |  |  |  |  |