Manchester City Schools' Title Programs

FOLLOW-UP DOCUMENTATION FOR PROFESSIONAL DEVELOPMENT

_____ School Year

Presenter(s):_____

_____

_____

_____

School: _____

Title of Training:_____

Follow-up Training Description:

(Also attach presentation agenda and sign-in sheet.)

_____

_____

_____

_____

_____

_____

_____

Date of Follow-up Training: _____

Number of Participants: _____ **Teachers**

_____ **Administrators**

_____ **Paraprofessionals**

_____ **Parents**

_____

Principal's Signature

Effective 07/12/07