SAU #13 Professional Development **Appendix D**

**PROFESSIONAL DEVELOPMENT SUMMATIVE REFLECTION FORM**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start of New Certification:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Types of Certification:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start Date of Plan (indicates if one, two, or three year plan): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please use March of recertification year as the end date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please summarize your professional development activities and outcomes;

* In what activities did you participate?
* Were there themes and inter-relationships?
* Relate your professional development endeavors to the Ed. 505.07 Professional Development Requirements (Appendix G). How have your experiences added to your knowledge of learners, learning, and/or content; how have they improved learner facilitation skills or promoted professional responsibility?
* What did you learn through these experiences?
* How have you/will you adjust your work as a result of your professional development activities?
* What has been the impact of your professional development on your students?
* How do you know?

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| --- | --- | --- | --- | --- | --- | --- |
| **Your signature** |  | **Date** |  | **Supervisor’s signature** |  | **Date** |