

## **Staff Professional Development**

## **Workshop Proposal Form**

The Office of Staff Professional Development encourages faculty and staff to initiate, facilitate, and/or conduct workshops that would be beneficial to the professional growth of Pensacola State College employees. If you are interested in presenting a professional development workshop please fill out the form, obtain approval and signatures then forward to the SPD office at least 2 weeks prior to the workshop start date. The information should be completed BEFORE items are placed on the SPD training calendar. Attached additional sheets if needed.

Contact Person(s):		Department Name:			Ext	Ext.:	
Workshop Title:							
Workshop Description	n:						
Presenter(s) Name/Ti	itle/Bio:						
Has this workshop be	en presented bef	ore? YesN	o If yes, please	provide course	e #D		
Workshop Date(s) ar	nd Time(s):				Suggested PD Credit Type To be completed by SPD	Section # To be completed by SPD	
Date	Day of Week	Time	Campus	Bldg/Rm#			
1.		From: To:					
2.		From: To:					
3.		From: To:					
4.		From: To:					
5.		From: To:					
6.		From: To:					
Preferences: Seating Limit: Audio-Visual Require		ation: Co	ollege-wide annound	cement: Yes _	No		
Projector:					nternet		
Speakers:	·		Handheld mic: Confe		ference Phone		
Other:					a Na		
will you need a	assistance making	arrangements f	or audio-visual requ	iirements? Ye	s No		
Work	shop Proposed By	/:		Date	e:		
Supervisor/	Department Head	d:	Date:				
Senior Le	evel Administrato	r:	Date:				
nal process date:	Initials:	<del></del>					