

SUBMIT TO:
Irvington Public Schools'
Office of Curriculum & Instruction

TURNKEY IN-SERVICE
REPORT



Submitted by: _____

School/Location: _____

Date Submitted: _____

Workshop Title: _____

Principal/Supervisor: _____
(signature)

ALL RESPONSES SHOULD BE TYPED

Name: _____ School/Location: _____

Position: _____

Title of Workshop: _____ CRN: _____

Conference Date: _____ Turnkey Date: _____

Turnkey Site: _____ Turnkey Population: _____

1. Identify the goal(s) listed in your individual Professional Development Plan (PDP), matching Professional Development Standard(s), and matching activity/ies sited on your Conference Request Form (CRF) as the rationale for attendance at this conference:

Example:

Goals: Goal A: Integrate various aspects of technology into the curriculum.

PDS: Standard #5: Provides for integrated new learning into the curriculum/classroom

Activity: To attend Out of District course/workshops.

I. Goal: _____

PDS: _____

Activity: _____

II. Goal: _____

PDS: _____

Activity: _____

III. Goal: _____

PDS: _____

Activity: _____

2. Describe in detail how your attendance at this conference/workshop addressed your PDP:

3. How did your attendance at this conference develop your knowledge base relative to your current position?

4. How will this knowledge guide students toward the successful attainment and mastery of the Common Core State Standards and/or the New Jersey Core Content Standards? Indicate which standards:

5. Based on your experience at the conference/workshop, what recommendations would you make to the district to best utilize the information to enhance student learning?

A completed Turnkey Report should be sent to the Office of Curriculum & Instruction within five (5) days of attending the conference/workshop.

Send to:

Dr. Shakirah Harrington Assistant Superintendent for Curriculum & Instruction
Office of Curriculum & Instruction
1 University Place
Irvington, NJ 07111