

HOLMDEL TOWNSHIP BOARD OF EDUCATION
Holmdel, New Jersey 07733

EXHIBIT

File Code: 4131.1



HOLMDEL TOWNSHIP PUBLIC SCHOOLS PROFESSIONAL LEAVE REPORT

NAME:

SCHOOL:

TEACHING ASSIGNMENT:

1. Provide the title, date, and a brief description of the experience.
2. What did you find was most beneficial about the experience?
3. What could have been improved about the experience?
4. Have you implemented the information in your class/course?
5. Professional Development Hours (if required) _____. ***Please note that this report, including Professional Development Hours, must be returned to Michelle Saler, Confidential Secretary, Human Resources in order to accrue Professional Development hours.***
6. Would you recommend that other staff members participate in this experience in the future?
Why or why not?

Board Approved: April 28, 2010