MILTON PUBLIC SCHOOLS MILTON, MASSACHUSETTS

PROFESSIONAL DEVELOPMENT 7, 3.5, or 1.75 HOUR STRAND PROPOSAL

Date Submitted: Date Proposal Submitted

Title: Your Workshop Title Goes Here

Presenter: Your Name Goes Here

Dates: School Year Workshops

Indicate the dates the strand will meet (workshops without dates will not be approved)

Times: *Indicate the times the strand will meet (workshops without times will not be approved)*

Location: Where will you meet?

Strand Description: What are the objectives of the workshop? How does it connect to district goals and initiatives? Please provide details.

Suggested Participants: Who should participate?

Maximum Enrollment: What is your enrollment limit?

Administrator Sponsor: You need to share this proposal with an administrator (principal, asst. principal, department head, or coordinator) before submitting. Name the sponsoring administrator here:

*Please email this proposal to Laurie Dunn at Ldunn@miltonps.org by Friday, October 31*st.

Thank you!