**PROFESSIONAL DEVELOPMENT LEAVE**

**REPORT**

*(This report must be completed in Word format)*

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| --- | --- | --- | --- |
| **Name** |  | **School/Dept.** |  |
| **PD Leave Began** |  | **PD Leave Ends** |  |
| **Interim Report** |  | **Date Prepared** |  |
| **Final Report** |  | **Date Prepared** |  |
| **PD Leave Goals***(Please include original goals as reflected in your original PD leave application, as well as any new and/or changed goals/objectives with a supporting explanation)* |
| **Report on PD Leave Plans/Activities***(Please describe your activities since commencement of your PD leave, identifying those that deviate from your original PD leave application with supporting explanation. Include dates of activities, courses taken/results, nature of activities and content, etc.)* |
| **Learning Outcomes Realized***(Reflecting on your PD leave to date, which learning outcomes reflected in your original submission have been realized and how? Please identify any that were not realized and why, as well as outcomes achieved that were not originally anticipated.* |
| **PD Plan Accomplishments***(Based on the PD Plan agreed upon between you and your supervisor, please highlight any professional development accomplishments to date as a result of this PD leave*). |
| **Benefits to Students/Staff***(Based on your activities and accomplishments to date in your PD leave, please describe how you plan to translate your experience into benefits for students and/or staff? Please identify any benefits that emerged during the PD leave that were not originally anticipated on your PD leave application.* |
| **Upon Your Return***(Please describe your short term (12 months) action plan for fully integrating your PD experience into your professional practice upon your return to the College.* |
| **Other Comments** |

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Employee Signature Date

**Please submit copies to:**

1. Your direct supervisor (Chair/Supervisor)
2. School/Department Dean/Director
3. SMT member
4. Director, Employee Success and Organizational Development