

Event Coordinator Reporting Sheet for Professional Development, Coaching, PLCs and Meetings

Reporting Event Coordinator:		Shelley Gladu		
Initiative Name:		New Teacher Induction Program - NTIP		
Event Title:		Individual NTIP Professional Development		
Date:				
·	Check One:	Face-to-Face	Teleconference	Videoconference
		t and Last Name) se Print	School	Signature (N/A if teleconference or videoconference)
l,	(on beha Name of Event C	f of S. Gladu) Coordinator	hereby confirm that the above individ	uals attended this event.
Date			Signature of Event Coordinator	
			Instructions for Completion	
			or immediately after every event and activity	y, including individual school activities.
2. The Event Coordinator will fax this form to the Education Secretary at 807-229-1471.				

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