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| **PROFESSIONAL LEARNING APPLICATION FORM** |

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| Name: |  |

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| **Professional Learning I am applying for is:** (please fill in applicable details below) | | |
| **Course / Workshop** | Course / Workshop Name |  |
| Provider |  |
| Location / Venue |  |
| Date & Time |  |
| Investment (include travel) |  |
| **Book** | Book Name |  |
| Investment |  |
| **Visit to Another Centre** | Centre Name |  |
| Location |  |
| Date & Time |  |
| Investment (include travel) |  |
| **Other** (please add details) |  | |

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| **Links to Learning** | Link to Appraisal Goals |  |
| Link to Strategic Plan |  |
| Link to Self Review |  |
| Learning that I expect to achieve… |  |

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| **Professional Development Plan:** (after the Professional Learning) | | |
| **Key Learning** | Aspects of key learning that I will implement in the Centre |  |
| How I will share this with the teaching team |  |
| How I will support the team to implement this learning |  |
| Resources |  |

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| *If my application for this professional learning is successful I agree to complete all the post learning tasks. If I do not complete these tasks I agree to refund the investment in my professional learning.* | |
| Signed |  |
| Date |  |