**Four gears of varying colors with the text Pennsylvania Adult Education Resources to the left of the gears. Individual Professional Development (PD) Form**

Use this form as directed by your Agency Professional Development Team.

| **Professional Learning Opportunity Information:**  Enter the following information about the professional learning opportunity you completed. | | |
| --- | --- | --- |
| **Activity Title:** | | |
|  | | |
| **Activity Description (include website link, if applicable)** | | |
|  | | |
| **Date you began the activity** | **Date you completed the activity** | **Number of hours spent on the activity** |
|  |  |  |

| **Focus Questions:** Reflect on your learning and record your responses below. |
| --- |
| **What are the two most important things you learned?** |
|  |
| **How will you apply what you learned in your practice?** |
|  |
| **How will you know this made a difference in your practice?** |
|  |

**Additional Comments:**Record any additional comments below.

| **Comments:** |
| --- |
|  |