



PROJECT LEARNING TREE® FACILITATOR COVER SHEET

Revised June 2018

(Please fasten securely to accompanying PARTICIPANT INFORMATION and PD EVALUATION FORMS)

I. Facilitator Information

Name: _____	Name: _____	Name: _____
Address: _____ _____	Address: _____ _____	Address: _____ _____
Email: _____	Email: _____	Email: _____
Phone: _____	Phone: _____	Phone: _____

II. Professional Development Information Event Type

Date(s) _____	In-Person	Blended (In-Person & Online)	Online only
Location (City, State) _____	Select the description that most closely represents this professional development event.		
# of participants _____	Up-to-half day (up to 4 hours)	Up-to-five days (17-30 hours)	
# of participant information forms attached _____	Full day (5-8 hours)	More-than-five days (more than 30 hrs)	
# of PD evaluation forms attached _____	Two full days (9-16 hours)	College or university course	

PLT Guides Distributed:

- | | |
|---|---|
| <input type="checkbox"/> Early Childhood | <input type="checkbox"/> Solid Waste |
| <input type="checkbox"/> PreK-8 | <input type="checkbox"/> GS Investigations |
| <input type="checkbox"/> Energy & Society | <input type="checkbox"/> Biodiversity |
| <input type="checkbox"/> Focus on Forests | <input type="checkbox"/> Biotechnology |
| <input type="checkbox"/> Forests of the World | <input type="checkbox"/> Southeastern Forests
and Climate Change |
| <input type="checkbox"/> Places We Live | <input type="checkbox"/> Green Jobs |
| <input type="checkbox"/> Focus on Risk | |

III. Professional Development Event Summary: *(For PLT State Coordinator's use. Below are examples of information you may want to collect for your state PLT program. Adapt the following for your own purposes as you wish.)*

1. Attach an agenda or briefly outline your PD event/workshop format, specifying which PLT activities from the PreK-8, secondary modules, or other PLT materials you included and why. Describe what factors influenced the topics and strategies that you used and the outcomes and objectives you were intending to meet.
2. Summarize expenses and/or revenues involved in your workshop. Include any in-kind support, i.e. contributions or personnel from agency, community, industry, or other partners.
3. Please list academic, continuing education, or other credits provided, if any.
4. Tell us your overall view of the workshop – include problems/successes and your assessment of the participants' responses.
5. I would / would not be interested in facilitating another PLT workshop because:

Please complete one of these forms each time a different group of participants is involved.
The PLT staff would like to thank you for your time and effort in providing this information.