PROJECT LEARNING TREE®
FACILITATOR COVER SHEET

(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

Date(s)_____

Name of Workshop _____

Location (City, State) _____

# of participants _____

# of participant information forms attached _____

# of PD evaluation forms attached _____

Event Type

☐ In-Person ☐ Blended (In-Person & Online) ☐ Online only

Fee Charged _____

Select the description that most closely represents this professional development event:

☐ Up-to-half day (up to 4 hours) ☐ Up-to-five days (30-40 hours)

☐ Full day (5-8 hours) ☐ More-than-five days (more than 40 hrs)

☐ Two full days (9-16 hours) ☐ College or university course

 # PLT Guides Distributed:

____ Early Childhood
____ PreK-8
____ Energy & Society
____ Focus on Forests
____ Forests of the World
____ Places We Live
____ Focus on Risk
____ Solid Waste
____ GS Investigations
____ Biodiversity
____ Biotechnology
____ Southeastern Forests and Climate Change

Please total the following from the participant reports:
Total miles driven one way (include your own): _____

Number/types of PLT guides received for workshop: _____

Number/types of PLT guides being returned: _____

For office use only:
___Scanned/submitted to National
___901 completed
___901 & roster submitted to CSU
____Entered into Quarterly State Report

III. Professional Development Event Summary (summarize below or on back):

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.