



Teacher Professional Growth Day

In order to qualify for substitute teacher pay, this form must be approved by the Superintendent of Schools. After this form has been approved, it will be returned and the event may be scheduled. Submit the completed form to education@txsda.org.

Name of teacher: _____

Professional Activity: _____

Date of Activity: _____ Hours Attended: _____

Location: _____

Purpose of Activity: _____

Value of Activity: _____

Activities that qualify: Classroom Observation
Workshop
Seminar

All expenses such as travel and/or fees are the responsibility of the teacher.

Principal's Signature: _____ Date: _____

Superintendent's Signature: _____ Date: _____