

Fayette County Public Schools POST-Trip Report

Name:		Date of Trip:		Date of Report:	
Position/Title:			Work Location:		
Name of PD or Activity Attending			Place/Site Visited:		

I. Findings and Observations (What did you learn; what information was presented).

What Conclusions and Recommendations would you suggest based on what you learned? (new concepts, approaches, and/or ideas)

II. Proposed Follow-Up; Action if any for improvement for yourself, your department, or FCPS as a whole?

How will you share /pass on what you learned with staff?

☐ Faculty Meeting

☐ Departmental Meeting

☐ In-Service

☐ Study Group

☐ Action Research Team

☐ Peer Coaching

Elaborate.

III. Individuals Contacted or Networking opportunities made (potential speakers, Professional materials, literature, pilot programs):

Signature:	Date:
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