

Teacher's Name \_\_\_\_\_ School: \_\_\_\_\_

**DICKENSON COUNTY PUBLIC SCHOOLS**  
**Professional Development Days/Workdays Calendar 2023-2024**

**Non-School Days**

**Please refer to the guidelines for activities that may be used to satisfy this requirement.**

<u>Date</u>	<u>Description of Activity</u>	<u>Teacher Check</u>	<u>Principal Check</u>
(1.) 8/3/23	Beginning of the year PD/Workday		
(2.) 8/4/23	Beginning of the year PD/Workday		
(3.) 8/7/23	Beginning of the year PD/Workday		
(4.) 8/8/23	Beginning of the year PD/Workday		
(5.) 1/3/23	Middle of year PD/workday		
(6.) 5/17/23	End of year PD/workday		
(7.) 5/20/23	End of year PD/workday		
(8.)			
(9.)			
(10.)			

**Work Days 11-20 May Be School Days**

**Please refer to guidelines for activities that may be used to satisfy this requirement.**

(11.)			
(12.)			
(13.)			
(14.)			
(15.)			
(16.)			
(17.)			
(18.)			
(19.)			
(20.)			
<b><u>Total Days</u></b>			

Each professional staff member must participate in a minimum of two (2) professional development activities with a directly instructional focus. Please list the dates and a description of these PD activities here. Directly instructional activity \_\_\_\_\_  
 Directly instructional activity \_\_\_\_\_

**I certify that the dates and activities declared on this sheet are accurate.**

Teacher's Signature	Principal's Signature
Date: _____	Date: _____