



PROFESSIONAL DEVELOPMENT WORKSHEET

<i>Event</i>	
Name	
Date	
Time	
Location/Address	

<i>Presenter</i>		
Name		
Contact Info	Address:	
	Phone #:	
	Email:	
Travel Needs	Hotel (yes/no)	Arrival Date:
(see back)	Rental Car (yes / no)	Agency Preference:
	Flight (yes/no):	Airline Preference:

<i>Location</i>		
Building/Rm		
	<input type="checkbox"/> Computer <input type="checkbox"/> Projector <input type="checkbox"/> Tables <input type="checkbox"/> Chairs <input type="checkbox"/> Podium <input type="checkbox"/> Screen <input type="checkbox"/> Adapters <input type="checkbox"/> Dry Erase Board & Markers <input type="checkbox"/> Speakers <input type="checkbox"/> Microphone <input type="checkbox"/> Supply Box	
Presentation Needs	<input type="checkbox"/> Document Camera <input type="checkbox"/> Laptops	Other _____
# of People		
Notes		

<i>Meals</i>	<i>Date / Time</i>	<i>Date / Time</i>
Breakfast		
Vendor		
Contact Info		
Notes		
Lunch		
Vendor		
Contact Info		
Notes		
Snack		
Vendor		
Contact Info		
Notes		

