



**THE ONTARIO ENGLISH CATHOLIC TEACHERS' ASSOCIATION**

**ALGONQUIN-LAKESHORE UNIT  
PROFESSIONAL DEVELOPMENT COMMITTEE**

**CONFERENCE/WORKSHOP/COURSE SUMMARY FORM**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

School: \_\_\_\_\_

Conference/Workshop/Course: \_\_\_\_\_

Location: \_\_\_\_\_ Date: \_\_\_\_\_

1. Brief Summary of the Professional Development Experience:

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2. Recommendations to P.D. Committee: (i.e. would you recommend this P.D. experience to other OECTA members) or other comments:

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3.  Yes, I have attached my receipt.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE FORWARD WITHIN 30 DAYS OF CONFERENCE ATTENDANCE OR  
COMPLETION OF COURSE IN ORDER TO BE REIMBURSED.**

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