

Post-Activity Information Evidence Form

USD 321 IMPACT/Skills Level 3

Name _____ Building _____

Goal: _____

Activity Title: _____ Date of Activity: _____

For all activities submit LEVEL 3 FORM following completion of each activity or in-service

- ✓ Attach copies of level 1 and 2 forms
- ✓ Attach documentation
- ✓ Points awarded will be 3X Level 1 approved for application
- ✓ Principal will need to sign and send to PDC Representative

On another sheet attach the following:

- A. **Reflection:** Describe your steps from the application level to the impact level.
- B. **Evidence of Impact:** What evidence was collected to document accomplishment of the identified outcome? List and attach evidence.
- C. **Impact:** What learning, behavior change, or impact was realized? What is the result of your newly acquired knowledge and skills in terms of impact on students, other adults, or program policy development? (Reg. 91-218)

Applicant _____ Date _____

Building Principal _____ Date _____

Building PDC Representative _____ Date _____

District PDC Chair _____ Date _____

SAMPLES OF DOCUMENTATION FOR EVIDENCE OF IMPACT

- Pre and Post Tests with explanation
- Anecdotal Records
- Grades-Analyze Project
- Projects
- Student Survey
- Other _____

Total Points Awarded

Approved

Not Approved (more information needed)