

**Professional Development Plan  
Preplanning for Independent Study Activities**

Name: \_\_\_\_\_ Member #: \_\_\_\_\_ Activity Dates: \_\_\_\_\_ to \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ TRID Chapter: \_\_\_\_\_

Title of Activity: \_\_\_\_\_

Overall Goal: \_\_\_\_\_

Objectives	Criteria for Measurement	Methods of Evaluation	Evaluation <i>(TRID CMP Admin)</i>
	Use "Codes" listed below.		
1.			
2.			
3.			
4.			

**Activity Description**

  
  
  
  
  
  
  
  
  
  

Codes			
Criteria for Measurement	Methods of Evaluation	Evaluation	Improvement Notes
1. Percentage Correct (state passing percent) 2. Improvement (state measure used) 3. Amount of Time (state required time) 4. Completion 5. Other _____	1. Documentation Log 2. Journal 3. Written Report or Article 4. Project 5. Evaluation Forms 6. Other _____	S Satisfactory N Needs Improvement U Unsatisfactory	1. Does not show evidence of certified level of learning. 2. Does not answer objective. — Missing or Incomplete