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PROFESSIONAL DEVELOPMENT **CLOCK HOURS**

The Illinois Reading Council is an approved ISBE Professional Development Provider. Registered attendees can earn one clock hour for each session attended. Please note that meal functions and other events are available for one (1) clock hour only. Registered presenters can also earn up to eight (8) clock hours for presenting a session. At the end of the conference, plan to submit your clock hours for the sessions that you attended and/or presented at the conference via one of two options.

OPTION 1 – ONLINE CLOCK HOUR FORM: You can enter your Record of Sessions Attended and Conference Evaluation Forms via the online form at: https://www.illinoisreadingcouncil. org/IRC-Conference-Evaluation-Form.

OPTION 2 - PRINT PDF COPY OF THE CLOCK HOUR FORMS: You can print the Record of Sessions Attended and Conference Evaluation Forms prior to your arrival at the conference and drop off the completed forms at the Registration Desk in the Exhibit Hall. The forms can also be mailed or faxed to the IRC Office within one week after the conference. The PDF Form is available at: https://www.illinoisreadingcouncil.org/assets/docs/Clock Hour Forms.pdf.

Please review your personal License Renewal Plan to determine which sessions fit. Be sure that your goals are broad enough to include a variety of literacy topics. The Illinois Reading Council is merely the provider. The responsibility for determining which sessions agree with your plan and are granted credits by your school district is yours.

The Illinois Reading Council will process the forms following the conference. Your clock hours will be entered directly into the ISBE PD Plus System. When entered, you will receive an email notification to log into your ISBE ELIS Account to complete the ISBE Evaluation Form through the ISBE PD Plus System. Once completed, you can print off your ISBE Evidence Form to keep for your records and your clock hours will be automatically added to your ISBE ELIS Account.

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IRC Record of Clock Hours Earned Form

You must complete both sides of this form and place in an evaluation box.

Instructions: Each registered participant must complete both sides of this form. This form must be signed and placed in an evaluation box prior to leaving the conference. Failure to complete this form or failure to turn it in may result in loss of professional development credit. For each session attended, you must list the session number, the title of the session, and the presenter(s) name. As a presenter, you may also earn additional clock hours. Other activities may also be listed. Participants earn one (1) PD hour per hour of participation at the conference. For meal functions and special events, only one (1) PD hour is earned for the presentation and not the meal or autographing. Following the conference, the ISBE Evidence of Completion Form with your verified clock hours will be mailed to registered participants.

Session #	Title of Presentation	Name of I	Presenter(s)
THURSDAY, MARCH 14,	2024		
7:00 AM			
0.00 434			
9:45 AM			
11:00 AM			
12:15 PM			
1 00 DM			
2:15 PM			
3:30 PM			
6:15 PM			
8:30 PM			
FRIDAY, MARCH 15, 202	4		
8:30 AM			
9:45 AM			
11:00 AM			
12:15 PM		_	
1 00 D) (
0.15 DM			
2 20 73 7			
TOTAL NUMBER OF PR	OFESSIONAL HOURS EARNED:		
I state, to the best of my	knowledge, that this form is true, co	rrect and comple	ete.
Signature of participant		IEIN #	
Name of participant (Must b	e registered to earn PD hours)		
Address	City	State	Zip
Email		Phone	

HELP US PLAN FOR 2025

Please use this form to evaluate this year's conference. Your reactions and suggestions are valued and will help us plan subsequent conferences with your preferences in mind.

Drop this in one of the evaluation boxes located at the Registration Desk (Thursday and Friday) OR complete the online form on the Conference App OR return to: Illinois Reading Council, 1100 Beech Street, Building 8-2, Normal, IL 61761.

		Strongly Agree	<u>Agree</u>	Somewh <u>Agree</u>	at <u>Disagree</u>				
1.	Overall, I was satisfied with the 2024 Conference .	4	3	2	1				
2.	Conference offered a wide variety of speakers/activities.		3	2	1				
3.	Author/illustrator presentations were enjoyable.		3	2	1				
4.	Featured educational speakers were valuable & relevant.		3	2	1				
5.	Teachers sharing their classroom practices were valua	ble. 4	3	2	1				
6.	Research-based presentations were valuable & releva	nt. 4	3	2	1				
7.	Who would you like to see present at a future IRC Cor	nference?							
	Name: Topic/Area		Contact info (if available):						
8.	8. I attended the Conference on (circle all that apply): Wed. Thurs. Fri.								
9.									
		ongly gree <u>Agree</u>		ewhat <u>e</u> <u>Di</u>	isagree				
A.	Wednesday evening Welcome Reception	4 3	2	1	N/A				
B.	Thursday evening Hear the Authors Read	4 3	2	1	N/A				
C.	Friday afternoon Illinois Reads Luncheon	4 3	2	1	N/A				
D.	Other								

10. In the Exhibit Hall, I wo	uld like the following pro	ducts and s	ervices to	be available:		
		Strongly Agree	<u>Agree</u>	Somewhat Agree	t <u>Disagree</u>	
A. Overall, the exhibits wer	e helpful and informative.	. 4	3	2	1	N/A
B. The complimentary refreshments were good.		4	3	2	1	N/A
D. How much time did you spend in the exhibit hall?		1 hou	ır or less	1-3 hours	3-6 hours	N/A
12. Please tell us about you	ırself.					
Age Range:	Years in Education:		Distance	e Traveled:		
18-24 25-39 40-54 55 and over	0-4 5-14 15-29 30 and over		less than 100 miles 101-200 miles 201-300 miles 300 + miles			
Current Position (Select O	ne)					
Administrator:	Classroom Teac	her:	(Other:		
Principal Superintendent Curriculum Supervisor Other:	Preschool K - 3 4 - 6 Middle/Jr. H High School Post Second		Pre-service Teacher Title I/Remedial Teacher Reading Spec./ Lit. Coach Gifted Teacher Spec. Ed. Teacher			
District Type:	ary	<u> </u>	Speech/La	Media Specia anguage Patho ide/ Paraprofe	ologist	
Urban Suburban Small City Rural/Small Town			- - -	Substitute Retired Te	Teacher	SSIGNAL