

## IRC Professional Learning & Development Cadre Application

Illinois Reading Council Professional Learning & Development (IRC PL&D) is a cadre of highly-qualified educators and professional learning providers available for full or half day on-site professional learning. IRC PL&D's goal is to assist clients in reaching all of their educational goals. Thank you for your interest in becoming a member of the cadre.

## **Application Criteria:**

- Applicant must submit the following documents
  - Completed Application Form
  - Current One-page Resume
- Cadre member must:
  - o be a member of Illinois Reading Council.
  - o have classroom experience.
  - o be an experienced professional development provider.

## If you wish to become a member of the IRC PL&D cadre, please complete and submit the form below.

- mail: Illinois Reading Council, 203 Landmark Drive, Suite B, Normal, IL, 61761.
- email: pd@illinoisreadingcouncil.org

• fax: 309-454-3512

Application Deadline: Rolling Applications Accepted

Questions: pd@illinoisreadingcouncil.org (Laura Beltchenko)

Name:						
Home Address:						
City:	State:	Zip:				
E-mail:						
Home Phone:						
Current Title/Position:						
School/District/Agency:						
Work Address:						
Please list an IRC member and their contact information as a reference:						

IRC	e space below, please include a PL&D provides tailored profes	sional learning based on t	he client's spec	ific needs and not sp	pecific
clien	entations. The following informations: Please list any analified to support. Attach a separation	d all audience preferences		_	
quan	med to support. Attach a separ	ate sheet if necessary.			
Educ	cator Audience Preference (Circ	le all appropriate): PreK	-K 1-3 4-	-5 6-8 9-12	Adults
	orsements/Areas of Expertise (e	_	_		
	nology, social emotional learnir sing, assessment, etc.)	ng, standards lead education	on, culturally re	levant instruction, of	ligital
be ac	se list the three most recent concepted) you have presented/facription of the workshop.	<u> </u>	•	<u>*</u>	-
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2.					
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3.	Conference/Client: Presentation Title/ Worksho	p Topic:			
	Date(s):	Indicate: Face to Fa	ce	Remote	
	Conference Contact:				
	Please check box to indicate that	you have read and accept the l	RCPD Protocol.		
Spea	ker Signature			Date	