

**Mississippi Department of Education  
Office of Professional Development**

**Professional Development Coordinator Request Form**

Note that all information on this form will be sent to the Professional Development Coordinator(s) assigned to provide the service. This form should only be used by MDE employees requesting additional assistance from a Professional Development Coordinator. A separate form must be submitted for each content area requested. E-mail the completed form to the PDC Lead ([klivingston@mdek12.org](mailto:klivingston@mdek12.org)).

Name(s) of PDC(s) requested

MDE Office Requesting Assistance:

Person requesting the services:

Provide a brief description of services requested (training, planning, meeting, etc.)

Work location

Preferred date(s) of Services Requested (if a single day of work requested):

1<sup>st</sup> Choice:

2<sup>nd</sup> Choice:

3<sup>rd</sup> Choice:

Beginning Time:

Ending Time:

Timeline of work with anticipated number of hours (i.e., Monday, August 8, 2016 – 5 hours):

Final Deadline for work on project:

Please save this form with your content area and include the date of submission [Example: Literacy\_09232016]. E-mail the completed form to the PDC Lead at [klivingston@mdek12.org](mailto:klivingston@mdek12.org).

Describe the monitoring that will take place to ensure that the requested service has been fulfilled.

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