

Assistant Superintendent or Director Information Form



Professional Development Alliance Will County ROE, Hon. Shawn Walsh



Please Type or Print:

District _____

Asst. Superintendent's/Director's Name _____

Cell Phone _____ Office Phone _____

Please check, as appropriate:

_____ Our school district is interested in having the PDA provide networking services for our new administrators.

Total cost of the 40 hr. program is \$3,000. Will County ROE grant to pay \$1,500. School District agrees to pay \$1,500 (invoice will be sent once administrator(s) are registered).

Assitant Superintendent's or Director's Name	Name of School District and mailing address	Email Address

Please return the completed form in one of three ways-

Mail to:
Professional Development Alliance
2705 McDonough St.
Joliet, IL 60436

Fax to:
Professional Development
Alliance Attn: Alexia Lopez
815-744-8396

Email to:
info@pdaonline.org