# C:\Documents and Settings\olivine-roberts\Local Settings\Temporary Internet Files\Content.Outlook\LMI12OHF\Two tone green apple with black type.jpgPRIOR APPROVAL REQUEST for PROFESSIONAL DEVELOPMENT ESEA

**Private Schools**

|  |  |  |  |
| --- | --- | --- | --- |
| S | School Name: |  | Contact Person: |
| D | Date Submitted: |  | Contact Phone: |
| E | Estimate Total Cost: |  | Funding Source: Title I Title II |
| **Attach flyer/brochure, which must include descriptions, dates and times.** |
| Name of Event/ Workshop: |
| D | Date(s): |  | Time: |
| Location: |
| Presenter(s): |
| **This professional learning activity must align with the objectives written in the annual Title I Plan or Title II Professional Development Plan****Please check one or more boxes consistent with the purpose of this request:**Increase student achievement consistent with the challenging state academic standards Improve the quality and effectiveness of teachers, principals, and other school leadersProvide low-income and minority students greater access to effective teachers, principals, and other school leaders**Please describe how the effectiveness of this activity will be evaluated:** |
| **M** S S 5 O F E | **Mail, Email or Fax request to:** Sacramento City Unified School District State and Federal Programs5735 47th Avenue, Sacramento, CA 95824Office: 916-643-9051Fax: 916-399-2063Email: Lisa-Torres@scusd.edu |  **D S** |  **Approved: Denied:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Director Date****State and Federal Programs** |

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