



# Program Activity Form

Hampden-Wilbraham Regional School District  
621 Main Street  
Wilbraham, MA 01095  
Center for Curriculum and Instruction  
Phone (413) 596-6045 Fax (413) 599-1572

Please keep this form as part of your Professional Development folder.

1. WHAT: *(Description)*

*What activities took place?*

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2. SO WHAT: *(Reflection)*

*What did you learn in relation to improvements in teaching and learning? How does this learning help you meet individual, building and/or district goals?*

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3. NOW WHAT: *(Action)*

*What do you plan to do as a follow-up to this experience?*

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PARTICIPANT \_\_\_\_\_ DATE \_\_\_\_\_

PROGRAM TITLE \_\_\_\_\_

INSTRUCTOR \_\_\_\_\_