

## **Professional Development Reflection Form**

Immediately after participating in a specific professional development training event, the student is required to document their participation (i.e.; the student will create a report that provides specific information about the event as well as written reflection about how the knowledge gained through the event will enable them to improve and increase their capabilities, career development etc). The paper should be minimum one page in length inserted in the space on page 2.

Once completed, please submit electronically to your advisor and the Graduate Program Coordinator (Jody.Bohonos@umanitoba.ca) to be counted. Progress is monitored by the Graduate Program Coordinator and is a requirement for graduation.

Student Name:	Student #
Professional Development Event:	
Dates: From:	To: (Date Format: DD/MMM/YYY)
Student Signature:	Date:
Advisor to complete:	
Did you provide pre-approval to yo	ur student to attend this PD training event? Yes No
Did you discuss this reflection pape	er (page 2) with your student upon completion? Yes No
Advisor Signature:	Date:
Co-Advisor Signature:	Date:
FKRM Associate Dean (Research and Graduate Studies) Approval Signature:	Date:



**Professional Development Reflection:** 

