**Ci3T Professional Learning Map**

School: Academic Year:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School Goal or Priority to Address | Focus Skill / Practice and Tier Addressed | Faculty or Staff Members to Lead | Type of Professional Learning  (if outside training, list provider, time, and cost) – Include plan to share with all faculty and staff | Timeline |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |