# Professional Staff Development Report

Printed Name Robby Burt

Date(s) of Activity 8-7-2020

Description of Activity Child Maltreatment, Title IX

Hours actually spent on activity/meeting or hours of college credit completed. **Click to enter text.**

Items of interest to other staff members **Mandatory Video**

Rate this activity in the follow categories from 1 to 5 (5 being the most positive response)

| | |
|---|---|
| To what level did the activity meet your expectations? | **3** |
| To what level did your involvement in this activity benefit you? | **3** |
| To what level did your involvement in the activity benefit UARM? | **3** |
| How strongly would you recommend this activity to others? | **3** |

Submission Date **8-18-2020**

Burt-Humanities

1. Add Last Name-Department to end of file name.
2. Submit the document to Yanel Rios.
3. Include a printed copy in program review binder.