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If an event is cancelled or postponed, registrants will be given the option of canceling their registration, receiving a full refund, applying their registration payment to another event, or attending the event if the event is rescheduled.

To receive a full refund, cancellations must be made in writing seven (7) days prior to the event. Cancellations received within six (6) days of the event are not eligible for a refund.



INSTITUTE ON DISABILITY / UCED
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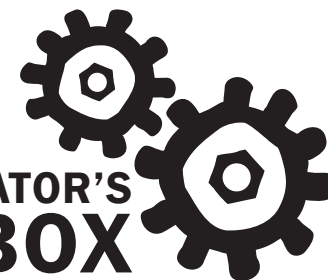


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INSTITUTE ON DISABILITY / UCED
A University Center for Excellence on Disability

THE PARAEDUCATOR'S TOOLBOX



Preschool & Elementary School

*Practical Strategies to Support
Academic Achievement for Students
with Learning and Behavioral Challenges*

DATES & LOCATIONS:

*Thursday, March 4, 2010:
Highlander Inn, Manchester, NH*

*Tuesday, April 6, 2010:
Holiday Inn, Concord, NH*

TIME: 9am – 3pm
Registration begins at 8:30am

REGISTRATION FEE: \$95

WORKSHOP INSTRUCTOR:

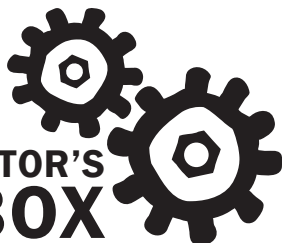
Cathy Apfel, M.Ed.



UNIVERSITY
of NEW HAMPSHIRE

Available in alternative formats upon request

THE PARAEDUCATOR'S TOOLBOX



Preschool & Elementary School

DATES & LOCATIONS:

Thursday, March 4, 2010:

Highlander Inn, Manchester, NH

Tuesday, April 6, 2010:

Holiday Inn, Concord, NH

TIME: 9am – 3pm, registration at 8:30am
Continental breakfast and lunch provided

REGISTRATION FEE: \$95

WORKSHOP AGENDA:

- Positive Behavior Interventions and Supports (PBIS): How it has changed our approach to supporting students with challenging behaviors
- Meeting basic needs and building relationships
- Understanding “function” and the meaning of behavior
- Choices, teaching alternatives, and acknowledging the positive
- Providing instructional accommodations that help students access the general education curriculum
- Supporting social competencies and promoting independence

DESCRIPTION:

Over the past five years, we have made a transition from perceiving situations in which a child exhibits challenging behaviors as a problem with the child to perceiving these situations as a problem with the environment (context). We no longer respond to these situations in ways that attempt to manage children, but in ways that identify and modify environmental variables to improve a child's quality of life through meaningful participation in both academic and social activities.

This workshop has been specifically designed for staff that work with **preschool through elementary aged children** and will explore a variety of proactive approaches that promote successful academic outcomes, social competency, independence, and resiliency. We will examine the role that “context” plays in children's behavior and will explore the various components of PBIS including meeting children's basic needs and modifying environments to better meet the social, emotional, and learning needs of children.

ABOUT THE INSTRUCTOR:

Cathy Apfel, M.Ed., has spent the last 38 years as a teacher, administrator, and consultant in the field of special education. She currently provides training and technical assistance to schools throughout New Hampshire to enhance their ability to provide successful experiences for children with disabilities. Specific areas of expertise include PBIS, Autism Spectrum Disorders, and strategies for supporting children with emotional and behavioral challenges. She is also an adjunct instructor at Rivier College, Antioch University New England, Granite State College, and Fitchburg State College.

Registration Form

THE PARAEDUCATOR'S TOOLBOX Preschool & Elementary School

TIME: 9am – 3pm, registration at 8:30am

REGISTRATION FEE: \$95

PLEASE SELECT DATE(S):

- 3/4/10 – Manchester
 4/6/10 – Concord

NAME: _____

EMPLOYER/ORGANIZATION: _____

TITLE / POSITION: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

THIS ADDRESS IS MY: HOME WORK

DAYTIME PHONE: _____

E-MAIL ADDRESS: _____

AN E-MAIL CONFIRMATION WILL BE SENT PRIOR TO THE EVENT

PLEASE SELECT METHOD OF PAYMENT:

CHECK #: _____ PURCHASE ORDER #: _____

CHECKS CAN BE MADE PAYABLE TO THE UNIVERSITY OF NH

VISA/MC #: _____

EXP. DATE: _____ TOTAL AMOUNT: \$ _____

I UNDERSTAND AND AGREE TO THE EVENT POLICIES ON THE REVERSE (SIGNATURE REQUIRED)

SIGNATURE: _____

PLEASE NOTE ANY DIETARY/ACCESSIBILITY ACCOMMODATIONS HERE:

***PAYMENT MUST BE RECEIVED PRIOR TO PARTICIPATION.**

4 Easy Ways to Register!

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