



**DEPARTMENT OF SPECIAL EDUCATION
PROFESSIONAL DEVELOPMENT 2008-2009**

**Deborah Sharpe-DeFries
Director**

**Darlene King
CSE Chairperson**

**Michele Bridgewater
Assistant Director**

Date	Location/Registration	Times	TOPIC/Presenter	INTENDED AUDIENCE
Thursdays September 25 October 16 December 11 January 15 Additional as Needed	Conference room Sunshine School Registration Forms to Carla Conklin at Sunshine School	3:30 – 4:30 PM	New York Alternate Assessment (NYSAA) Deborah Sharpe DeFries/Micheline Ornston	Special Education/Regular Education (K-12 Teachers) (Targeted Teachers will be notified)
Monday, September 29	Conference Room Sunshine School Registration forms to Kim Reilly Sunshine School	3:30- 5:00 PM	Overview of Preschool Special Education Jane Figueroa	Preschool teachers, TA's Principals, Other Interested People
Thursday, October 16	Library Myers Middle School Registration forms to Carla Conklin Sunshine School	3:45- 5:15 PM	An Overview of Section 504 What Is It? – Who Is covered? Tara Moffitt, Esq. Karen Halaco, Esq. Girvin & Ferlazzo	Principals, Administrators, Psychologists, Nurses
Tuesday, October 21	Conference Room Sunshine School Registration forms to Diane Lloyd at Sunshine School	3:30- 5:00 PM	IEP Writing Darlene King CSE Chairperson	All Special Education Staff/Social Workers/Speech Therapists/OT/PT
Tuesday, October 28	Conference Room Sunshine School Registration forms to Diane Lloyd at Sunshine School	3:30- 5:00 PM	IEP Writing Darlene King CSE Chairperson	NEW TEACHERS
Wednesdays October 22 Or January 14	Conference Room Sunshine School Registration forms to Micki Ornston Eagle Point	3:30 – 5:30 PM	How to Workshop on Functional Behavioral Analysis & Behavior Intervention Plans Micheline Ornston	ELEMENTARY Special Ed/Regular Ed Teachers/TA's

<p>Tuesday, November 18</p>	<p>Conference Room Sunshine School</p> <p>Registration forms to Peggy Morehouse Sunshine School</p>	<p>3:30- 5:00 PM</p>	<p>Assessment and Intervention for Students with Auditory Processing Problems</p> <p>Peggy Morehouse</p>	<p>Speech Therapists, Teachers, Teacher Aides/Assistants, School Psychologists, Social Workers</p>
<p>Wednesdays, November 5, December 3, February 4, and April 1</p>	<p>Conference Room Sunshine School</p> <p>Registration forms to Carla Conklin Sunshine School</p>	<p>3:30 5:00 PM</p>	<p>Closing The Gaps This session will provide a framework for understanding school practices that foster inequity. In addition, the session will offer strategies for increasing student outcomes.</p> <p>Michele Bridgewater</p>	<p>All staff</p>
<p>Thursdays, October 2, 16, 23 and 30 (Must attend all four sessions)</p>	<p>Montessori Magnet School 65 Tremont Street</p> <p>Registration forms to Carla Conklin Sunshine School</p>	<p>4:00 – 8:00 PM</p>	<p>Therapeutic Response Training (FULL) This training will provide the participant with strategies in relationship building, intensive interventions, behavior management skills, managing self-skills, depersonalizing issues and de-escalation training.</p> <p>Parsons Sydney Albert Institute</p>	<p>Special Education Teachers, Regular Education Teachers, Teaching Assistants, Teacher Aides, Members of the School Crisis Team</p>
<p>Wednesday September 24</p> <p>OR</p> <p>Wednesday, November 5</p>	<p>Montessori Magnet School 65 Tremont Street</p> <p>Registration forms to Carla Conklin Sunshine School</p>	<p>4:00 – 8:00 PM</p>	<p>Therapeutic Response Training This training will update the participant with strategies in relationship building, intensive interventions, behavior management skills, managing self-skills, depersonalizing issues and de-escalation training. (Please sign up for <u>only one day.</u>)</p> <p>Parsons Sydney Albert Institute</p>	<p>Special Education Teachers, Regular Education Teachers, Teaching Assistants, Teacher Aides, Members of the School Crisis Team</p>

Use of a separate form for each training course for which you are registering. Provide all of the requested information, and submit to the person indicated.

Name:

Position:

**Subject and grade level
Or Department:**

School:

School Telephone:

Home Address:

Home Telephone:

E-mail Address:

Course Title:

Date(s) of Course:

Duplicate this form as necessary