Title: Physical Education and Health Education Directors’ Consortium

WHAT: This consortium is a series to foster the continual growth of a long standing Professional Learning Community for PE and Health Education Directors. The focus is on sharing best practices in curriculum, instruction, and assessment in PE and Health Education. Topics of discussion may include, but are not limited to; State Education updates, training and deliverables (pre-assessments, data target setting, technology training, Common Core Literacy Standards as it relates to PE and health, etc.) adapted PE, regulations, and the PE Profile. The PE and Health Education Directors’ Consortium provides the forum to discuss participant needs and action items. Participants are encouraged to bring district/curriculum relevant materials, current conversation topics needing input, and ideas to each meeting.

WHERE: Erie 1 BOCES Education Campus, 355 Harlem Road, West Seneca, NY 14224
Rooms: Days 1, 2 & 4: A1   Day 3: A 2

WHEN: Day 1: Friday, October 12, 2018   Rm: A1   REGISTRATION: 8:00am
   Day 2: Friday, January 11, 2019   Rm: A1   TIME: 8:30am – 11:30am
   Day 3: Friday, March 1, 2019   Rm: A2
   Day 4: Friday, May 17, 2019   Rm: A1

TARGET AUDIENCE: K-12 Physical Education and Health Education Directors

FACILITATOR(S): Kate Huber

COST: $320 /per participant   CODE: 535.009.02
Charter Schools: $352 /per participant   (For those schools not in the base service, there will be a 10% processing fee)

CTLE: CTLE Hours: 12   ELL Hours: 0   Pedagogy Hours: Yes/No   Content Hours: Yes/No

Follow your school district’s procedures to register for workshops. For further information, please contact Kate Huber at (716) 821-7566 or khuber@e1b.org. For registration information or cancellation, please contact Elvie Mertz at (716) 821-7221; FAX (716) 821-7498; or Email: emertz@e1b.org. Cancellation Policy: Cancellations are required at least 48 business hours prior to the start of the workshop to allow us to fill the class from our waiting list. Failure to do so will result in your district being charged for the class. All no-shows will be billed for the full amount of the workshop.

WHEN YOU ARE OFFICIALLY REGISTERED, AN AUTOMATIC EMAIL CONFIRMATION # WILL BE SENT.

Please make sure your email is correct! We will only contact you for a wait list, event postponement or event cancellation.

Registration Form IRT#641: Please Print to complete this registration portion and return completed flyer to:
Elvie Mertz, 355 Harlem Rd., W. Seneca, NY 14224  emertz@e1b.org  FAX – 716-821-7498

Participant Type:   ○ Administrator   ○ Teacher   ○ Paraprofessional   ○ Other: ________________
Sub Reimbursement:   Half Day   YES○   NO ○
NAME: ____________________________________________   POSITION/GRADE LEVEL: ____________
EMAIL ADDRESS: ____________________________________________
WORK PHONE: (_____) ___________X______ HOME PHONE: (_____) ___________ (only needed for event postponement)
DISTRICT: ____________________________   SCHOOL BLDG.: ____________________________

NEED CTLE CERTIFICATE? ___NO or ___YES. IF YES, PROVIDE REQUIRED MONTH & DAY OF DOB: ___/

*OPTIONAL CTLE INFO FOR CERTIFICATE: Year of DOB: _______   Last 4 Digits of SSN: _________

REQUIRED: S.D. ADMINISTRATOR’S SIGNATURE: ____________________________   DATE: ____________

*****ALL BILLING WILL GO THROUGH BOCES BILLING UNLESS NOTIFIED OTHERWISE*****