Scoring the New Global History and Geography II Regents Exam (NYS SS Framework)

WHAT:
This workshop will provide high school social studies teachers with training and assistance surrounding the scoring of the June 2019 NYS SS Framework-aligned Regents exam for Global History and Geography II. Participants will examine and discuss all materials contained in the NYS Scoring Guide including rubrics for the Part II Constructed Response Questions and rubrics, anchor papers and practice papers for the Part III Enduring Issues essay task. NOTE: session will run twice: once in the AM & in the PM.

WHERE: Erie 1 BOCES Education Campus, 355 Harlem Road, West Seneca, NY 14224
Rooms: B2A/B2B

WHEN: Tuesday, June 4, 2019   (Please choose one only) TIME: 8:30 am – 11:30 am
OR 12:00 pm – 3:00 pm

TARGET AUDIENCE: Social Studies teachers or Scoring Leaders for the New Global History and Geography II Regents Exam (NYS SS Framework)

FACILITATOR(S): Jessica Karnes and Stephanie Giermek

COST: $ 80/per participant   CODE: 535.009.02
Charter Schools: $88/per participant   (This includes the 10% Charter fee.)

CTLE: CTLE Hours: 3   ELL Hours: 0   Pedagogy Hours: No   Content Hours: Yes

Follow your school district’s procedures to register for workshops. For further information, please contact Jessica Karnes, jkarnes@e1b.org. Please contact Elvie Mertz at (716) 821-7221; FAX (716) 821-7556 or Email: emertz@e1b.org for registration information or cancellations.

Cancellation Policy: Cancellations are required at least 48 business hours prior to the start of the workshop to allow us to fill the event from our waiting list. Failure to do so will result in your district being charged for the event. All no-shows will be billed for the full amount of the event.

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 an event postponement or event cancellation or if you are on the wait list.

Registration Form IRT# 704: 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: ½ Day: YES  NO

Please choose only 1:  ☐ 8:30 am – 11:30 am  OR  ☐ 12:00 pm – 3:00 pm

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*****