Conference Registration Form

Response to Intervention Cohort Training Session

Topics:  Day 1 (July 16): VTSS: The Big Ideas of Middle and High Schools - Dr. Mark Shinn
Day 2 (July 17): VTSS: Evaluation - Winding Down and Moving Up

Audience for July 16-17 (All cohorts are expected to attend both days):
VTSS Cohort Central Office Leadership Team
VTSS Cohort School Principal and VTSS Cohort Assistant Principal or VTSS School Leader

July 16-17, 2013
The Hotel Roanoke and Conference Center • Roanoke, Virginia

Please print or type—complete a separate form for each participant

Name
Title

School Division
School Name

Mailing Address
City  State  Zip
Daytime Phone No.  Fax No.
Email  Signature

Please indicate your working title:
☐ Assistant Principal  ☐ Director of Special Education
☐ Assistant Superintendent  ☐ Principal
☐ Curriculum Specialist  ☐ Superintendent
☐ Director of Instruction  ☐ Other: Please specify: ____________________________

Please indicate any medically necessary (or vegetarian) dietary needs that you have: ____________________________

Return form by July 9, 2013 (no staples, tape, or paper clips, please) to:
Conference Registrar
Continuing and Professional Education
Virginia Tech, Mail Code 0272
702 University City Blvd.
Blacksburg, VA 24061
phone: 540/231-5182 • fax: 540/231-3306

The information you provide is subject to the Freedom of Information Act guidelines.

Office Use Only

Received  DATE: __________
INITIALS: __________

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