

***Career and Technical Education
Professional Learning Day
Workshop Proposal Form***

- Please type or print this form -

-copies of this form can be downloaded from www.nysut.org -

1. Please list the primary presenter (person receiving notification regarding this proposal):

Name:

Title:

District/Professional Affiliation:

Address:

Phone:

Fax:

E-mail:

Please also provide your summer address and contact information, if it will be different from the above address:

2. Name, title, NYSUT local union name for all presenter(s) **as it should appear in the program:**

NAME

TITLE

NYSUT LOCAL UNION

3. Workshop Title (to be listed in the program):

4. Workshop Description (as you want it to be included in the program):

5. Which topic area(s) from the Call for Proposals does this workshop address?

6. What are the existing indicators of success for this program (e.g., increased student test scores, data, multiple measures) that substantiate the merit of including this presentation in this conference? Have other districts or institutions replicated your program?

7. What will your participants know or be able to do at the conclusion of the session?

8. Check those for whom this session might be of particular interest or value:

- BOCES CTE Teacher
- Secondary Teachers
- Higher Education Faculty
- BOCES School Related Professionals
- CTE Teacher (high school)
- District Administrator
- Content Teacher
- Other _____
- Teacher Center
- Staff Developer
- Staff Development Specialists

9. a. The following media support will be provided **if requested in advance**. Please check which item(s) you need:

- Overhead Projector
- Newsprint flip-chart
- TV/VCR

b. Indicate your preferred room setting: Round Table Theater Classroom

IF YOU ARE PLANNING TO DO A POWERPOINT PRESENTATION YOU MUST BRING YOUR OWN LAPTOP AND PROJECTOR

10 Workshop Session Indicate preference in rank order:

PREFERENCE FOR SESSION TIME – ALL SESSIONS ARE FRIDAY, OCTOBER 22, 2004

- 10:00 AM – 11:30 AM
- 1:00 PM – 2:30 PM
- 2:30 PM – 4:00 PM

Local President's Support of Participation in the CTE Conference

I, _____, the local union president from the _____, (Local Name), support the above workshop proposal for the Career and Technical Education Professional Learning Day scheduled for Friday, October 22, 2004.

Please mail or fax a copy of the proposal by June 4
By mail to Maureen Rizzi, Manager of Training
New York State United Teachers
800 Troy Schenectady Road
Latham, New York 12110-2455
Or by fax to Carolyn Williams at 518 213-6450
 46385