

This event is presented by the CESA 6 Title I Quality Program Support Network

QUALITY PROGRAM SUPPORT -END-OF-YEAR TITLE I **DATA AND PROGRAM EFFICACY**

WEDNESDAY, APRIL 22, 2015 . 9:00 A.M. - 2:30 P.M.

PRESENTERS:

KATHY SCHMITT, CESA 6 LITERACY CENTER DIRECTOR NICOLE LEHR, LITERACY CENTER COORDINATOR — ANNE PAGEL, LITERACY CENTER COORDINATOR MARY ANN HUDZIAK, TITLE I STATEWIDE NETWORK COORDINATOR & ESEA SUPPORT NETWORK

Description:

This workshop session will include general sessions and break-out sessions, all designed to support the Title I Pathways of attendees.

Objectives:

- End-of-Year Data Collection Evaluate and summarize the data
- Program Efficacy Draw conclusions about the Pathway Plan, develop recommendations for the 2015-2016 QPS Title I Pathway
- Increase your knowledge, skills and dispositions specific to your Title I Pathway.

Who should attend?

This workshop is only for schools receiving QPS Title I services. All teachers and leaders involved in the school's Title I Pathway are encouraged to attend.

For additional information contact:

Kathy Schmitt, CESA 6 Literacy Center Director; kschmitt@cesa6.org or 920.573.2676

Registration Details

- Date: April 22, 2015
- Registration Fee:
 - $\sqrt{10}$ \$10 for CESA 6 Title I Quality Program Support Districts
 - ✓ Fee includes materials, lunch & snacks
- Time: 9:00 a.m. 2:30 p.m.
- Onsite check-in: 8:30 a.m. 9:00 a.m.
- Location: **CESA 6 Conference Center** 2300 State Road 44: Oshkosh. WI 54904
 - Registration Deadline: April 15, 2015
 - Online registration:

http://www.cesa6.org/prof_dev/

Cancellation Policy: Any registration cancellation must be received 48 business hours prior to the scheduled date for a refund to be issued. Because attendance at most sessions is limited, persons registering and not in attendance on the day of the session will be charged the full registration fee. CESA 6 reserves the right to cancel any session due to insufficient enrollment. Participants will be notified by email or phone if a cancellation occurs.

Quality Program Support—End-of-Year: Title I Data and Program Efficacy April 22, 2015

Participant	Name(s)

Position(s)

District

(Home)

Phone (Work)

Email Address

Special accommodations or dietary needs To Register: Go to http://www.cesa6.org/prof_dev/_or send completed form to:

Sue Christensen, Program Assistant,

CESA 6, 2935 Universal Court, Oshkosh, WI 54904, Fax: 920-424-3478

Please check one:

Check is enclosed, made payable to CESA 6 □ Bill my School District, PO #

- Use my Conference Attendance Fund
- (CESA 6 employed staff ONLY)
- Credit Card Payment

Cardholder Name

Cardholder Address (include city, state ZIP)

Credit Card Type (VISA, MasterCard, etc.)

Credit Card Number

Expiration Date

3 Digit Code on Back of Card