



Effectiveness Project[®] Central Office Performance Evaluation System (COPES)

Audience for COPES Training: Central Office professionals (Directors of : C&I, Pupil Services, Human Resources & Business, Technology, Buildings & Grounds, and Superintendents) or others responsible for evaluating Central Office personnel.

Training Description

Central Office Performance Evaluation System training will engage administrators in a process that will:

- Unite Central Office Administrators and District Administrator/Superintendent's in a partnership for professional growth.
- Enhance the Central Office Administrator and Superintendent's understanding of the research-based COPES standards, indicators, and rubrics; as well as the concept of preponderance of evidence used to document and score the performance of the COPES practice and product.

Training Times

AM Session: 8:30 a.m. – Noon

PM Session: (Optional) MyLearningPlan Support and Networking Lunch

12:15 p.m.—2:15 p.m.

Costing

One time training fee:

- 1 = \$400
- 2 = \$750
- 3 = \$1,050
- 4 = \$1,300
- 5+ = \$1,500

Non EP[®] districts, one-time MyLearningPlan configuration fee of \$1,500

More Information

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Cancellation Policy: Any registration cancellation must be received 48 business hours before 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.

Training Dates

September 29, 2015

CESA 6 (Oshkosh)
Half day COPES training with
optional PM MLP OASYS Support

November 17, 2015

CESA 6 (Oshkosh)
Half day COPES training with
optional PM MLP OASYS Support

November 18, 2015

CESA 6 (Oshkosh)
Half day COPES training with
optional PM MLP OASYS Support

Online Registration: www.myquickreg.com

_____ CESA 6 Sept 29

_____ CESA 6 Nov 17

_____ CESA 6 Nov 18

Participant Name(s) _____

Position(s) _____

District _____

Phone (Work) _____

(Home) _____

Would you like to be notified by email of future CESA 6 training sessions? Yes No

Email Address _____

Special accommodations or dietary needs _____

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 _____

**To Register: Go to <http://www.myquickreg.com> or send completed form to:
Beth Oosterhous, Program Assistant
CESA 6, 2935 Universal Court, Oshkosh, WI 54904, Fax: 920-424-3478**