

(PBIS)

Positive Behavioral Interventions and Supports Administrative Overview (AS50)

October 8, 2010

Positive Interventions and Supports (PBIS) is a proactive systems approach for creating and maintaining safe and effective learning environments in schools and ensuring that all students have the social/emotional skills needed for success. This half day overview session is for district leadership teams interested in the why, what, and how of implementing a School-wide Positive Behavior Interventions and Supports (SW-PBIS). Included in the presentation are district and school commitments for success (what it takes to implement PBIS with integrity). Sample data, systems, and practice activities are conducted during this overview. This overview is appropriate for teams to attend.

Audience: PK-12 District and Building Administrators, Pupil Services Directors/Coordinators, Teacher Leaders,

and Potential Site-Coaches

Presenter: Michelle Polzin, PBIS Regional Technical Assistance

Coordinator for WI East Regional PBIS Center serving

CESA 6 and 7

Time: 9:00—Noon (registration 8:30—9:00 a.m.)

Location: CESA 6 (large conference room) •2300 State Road 44•Oshkosh

Cost: \$40 per person (includes continental breakfast and materials)

Registration Deadline: October 1, 2010

Four Integrated Elements



For more information contact:

Maryjane Burdge, CESA 6 PBIS Team (920) 279-4143 mburdge@cesa6.k12.wi.us

Cancellation Policy: Any workshop registration cancellations must be received 48 hours before the workshop scheduled date, for a refund to be issued. Because attendance at most workshops has to be limited, persons registering for a workshop and not in attendance on the day of the workshop will be charged the full registration fee.

Positive Interventions and Supports (PBIS) Overview (AS50)C October 8, 2010 Location: CESA 6 Collaborations Center (large conference room) Oshkosh		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	
Participant Name(s)			
Position(s)	District	Cardholder Name	
Phone (Work)	(Home)	Cardholder Address (include city, state ZIP)	
Would you like to be notified by email of future CESA 6 training sessions? ☐ Yes ☐ No		Credit Card Type (VISA, MasterCard, etc.)	
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RETURN TO: Janet Aderman, Program Assistant, jaderman@cesa6.k12.wi.us CESA 6. PO Box 2568. Oshkosh. WI 54903-2568		Expiration Date	3 Digit Code on Back of Card