



BYOC

Connecting/Sharing Group

Mary Ann Hudziak

Improving Student Learning through Sound Curriculum and Assessment

Build Your Own Curriculum may be a new product for you or perhaps you have used it for a long time, either way, this opportunity to network is open to you. Share what you like about this system or bring questions. This networking opportunity will be available four times this year. A new agenda will be prepared for each gathering based on your requests. Some topics may include:

- What is the transfer process and timeline?
- How do we get started entering our curriculum (new, continuing, updating)?
- What are "learning targets" and why are they important?
- How can I apply the Common Core Standards of Mathematical Practice and Literacy to all courses?
- What kinds of reports are available and how do the different stake holders access them?
- What is Build Your Own Assessment and how does it work with Build Your Own Curriculum?

October 18, 2011

November 29, 2011

Location: CESA 6, 2300 State Road 44, Oshkosh
12:30-3:00pm

February 28, 2012

Location: CESA 6, 2300 State Road 44, Oshkosh
12:30-3:00pm

April 24, 2012

Location: Comfort Inn & Suites, 400 S. Koehler Street, Oshkosh
12:30-3:00pm

Cost: \$100 for all four sessions

To Register: Go to myquickreg.com

For Additional Information, please contact:
Mary Ann Hudziak, Math and Science Learning Coordinator
920-236-0523 or mhudziak@cesa6.org

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.

BYOC Users Group

October 18, 2011 — November 29, 2011 — February 29, 2012 — April 24, 2012

See locations above...

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 myquickreg.com to register or you may send this form to:

Donna Runice, Program Assistant, CESA 6, PO Box 2568, Oshkosh, WI 54903-2568, Fax: 920-424-3478