

Maximize Your Touch

Using Ipads/Ipods within the Early Elementary

Classroom

April 18, 2012

Presenter: Paula Walser, Director of E-Learning



This introductory level workshop will introduce participants to the iOS devices from Apple computing including the ipad, ipod and iphone.

Participants will be provided with:

- instruction in basic use of the device including cameras, microphone, speakers, navigation, and organization of apps.
- "Hands-on" instruction on classroom apps in the areas of reading, writing, art, music, organization, math, scientific exploration, and fact finding
- access to a website full of resources for using this powerful mobile technology tool within the classroom.

REGISTRATION DETAILS

• Date: April 18, 2012

• Cost: \$150.00 per person

• Time: 9:00 a.m. - 3:00 p.m. (Registration 8:30 a.m. - 9:00 a.m)

- Location: CESA 6 Office · 2300 State Road 44 · Oshkosh WI 54903
- Registration fee includes, materials, continental breakfast and lunch
- Registration Deadline: April 11, 2012
- Online registration available at: http://www.cesa6.k12..wi.us/prof_dev/



- Popular accessories for classroom use will also be available for demonstration!
- Ipads/ipods will be available for use.
- Participants are also encouraged to bring their own iOS device (iphone, ipad, ipod).

For Additional Information Contact:

Paula Walser, Director of E-Learning - CESA 6 - 920.236.0541 or pwalser@cesa6..org

Maximize Your Touch ~ Using Ipads/Ipods within the Early Elementary Classroom

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

CESA 6 - Large Conference Room April 18, 2012		☐ 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)		and the second 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.)	
Email Address	Special accommodations or dietary needs	Credit Card Number	
RETURN TO: Debbie Pinkerton, CESA 6, PO Box 2568, Oshkosh, WI 54903-2568 (920) 236-0548		Expiration Date	3 Digit Code on Back of Card