



Skyward CTEERS

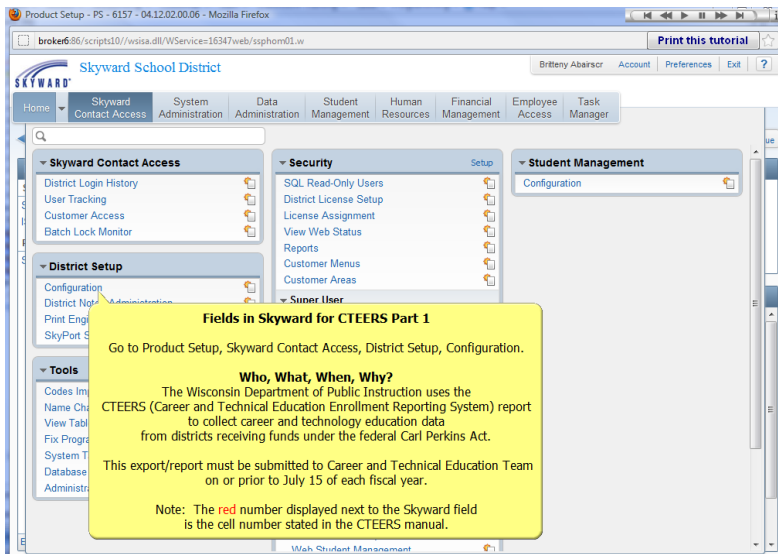
Training

April 12, 2012

Facilitator: Renee Skortz, Skyward Inc

This session will demonstrate how to input data using the Career and Tech tab defaults utility and manual entry. We will also discuss how to extract, maintain, and export CTEERS files for local submission.

- Review field placements for CTEERS.
- How to use the Mass Update Career and Tech Tab Defaults Utility.
- How to process CTEERS extract options.



Registration Details:

- **Date:** April 12, 2012
- **Registration Fee:**
✓ FREE
- **Time:** 9:00 a.m. - 12:00 noon
(Registration 8:30 a.m. - 9:00 a.m.)
- **Location:**
CESA 6 Office 2300 State Road
44 · Oshkosh WI 54903
- **Registration Deadline:**
April 5, 2012
(one week prior to event)
- **To register:** visit http://www.cesa6.k12.wi.us/prof_dev/

For additional Information Contact:
Tania Kilpatrick
Career and Technical Education
Coordinator
920.236.0531 or kilpatrick@cesa6.org

Cancellation Policy: Any registration cancellation must be received 48 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 reserved the right to cancel any session due to insufficient enrollment. Participants will be notified by email or phone if cancellation occurs.

Skyward CTEERS Training
April 12, 2012
CESA 6 Office - 2300 State Road 44, Oshkosh

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 _____

RETURN TO:

Debbie Pinkerton, Program Assistant, CESA 6, PO Box 2568, Oshkosh, WI 54903-2568

Please check one:

- Check is enclosed, made payable to CESA 6
- Bill my School District, PO # _____
- Use my Conference Attendance Card (CESA 6 employed staff ONLY)
- Credit Card Payment

Cardholder Name _____

Cardholder Address (include city and state ZIP) _____

Credit Card Type (Visa, MasterCard, etc.) _____

Credit Card Number _____

Expiration Date _____

3 Digit Code on Back of Card _____

FREE