

Developing a Math Foundation to Withstand the Big, Bad Wolf (Gr. K-4)

Monday, November 5, 2012 • 8:30 a.m.—3 p.m.

Presenter: Mary Ann Hudziak

CESA 6 Coordinator of Math and Science

Description

This workshop digs into the *Number Sense* standards of the Common Core. We will look at math progressions to help build strong foundations and diagnose gaps and misconceptions.

Workshop Objectives

- Develop number sense activities that incorporate the intent of the Wisconsin Common Core Standards for Mathematics for grades K-4.
- Understand the number and operations horizontal and vertical progressions.
- Evaluate tasks that can be used for instruction and assessment of number sense standards.
- Explore and/or develop activities for intervention needs of students around number and operations.

Who should attend?

- Elementary classroom teachers
- Title I Teachers
- Special Education Teachers

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Registration Details

- Date: November 5, 2012
- Registration Fee:
 - √ \$100.00 per participant for Math Center members
 - √ 150/person for non-Math Center Members
 - √ Cost includes all materials and a light lunch
- Time: 8:30 a.m. 3 p.m.
- Onsite check-in: 8 8:30 a.m.
- Location:

CESA 6 Conference Center 2300 State Road 44 Oshkosh WI 54903

- Registration Deadline: October 25, 2012
- Online registration: http:// www.cesa6.k12.wi.us/prof_dev/

For additional information contact:

Mary Ann Hudziak, Coordinator of Math and Science—mhudziak@cesa6.org or 920.236.0523

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 a cancellation occurs.

November 5, 2012		☐ Check of the. ☐ 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.)	
Email Address	Special accommodations or dietary needs	Credit Card Number	
To Register: Go to http://www.cesa6.k12.wi.us/prof-dev/ or send completed form to: Donna Runice, Program Assistant CESA 6, 2935 Universal Court, Oshkosh, WI 54904, Fax: 920 424 3478		Expiration Date	3 Digit Code on Back of Card