



Maximize Your Touch Using iPads/iPods within the Early Elementary Classroom

Thursday, April 18, 2013 • 9 a.m. - 3 p.m.

Presenter: Paula Walser
CESA 6 Director of E-Learning

Description

This introductory level workshop will introduce participants to the iOS devices from Apple computing including the iPad, iPod and iPhone. Popular accessories for classroom use will also be available for demonstration.

Workshop Objectives

- 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.



iPads/iPods will be available for use

Who should attend?

- Kindergarten and early elementary educators and leaders
(Participants are encouraged to bring their own iOS device (iPhone, iPad, iPod))

For additional information contact:

Paula Walser, CESA 6 Director of E-Learning, pwalsler@cesa6.org or 920.236.0548

Registration Details

- **Date:** April 18, 2013
- **Registration Fee:**
 - ✓ \$165.00 per participant
 - ✓ Fee includes materials, continental breakfast and lunch
- **Time:** 9 a.m. - 3 p.m.
- **Onsite check-in:** 8:30 - 9 a.m.
- **Location:**
CESA 6 Conference Center
2300 State Road 44
Oshkosh WI 54903
- **Registration Deadline:**
April 11, 2013
(one week prior to event)
- **Online registration:** http://www.cesa6.k12.wi.us/prof_dev/

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.

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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 _____

**To Register: Go to http://www.cesa6.k12.wi.us/prof_dev/ or send completed form to:
Debbie Pinkerton, Program Assistant,
CESA 6, 2935 Universal Court, Oshkosh, WI 54904, Fax: 920-424-3478**

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 _____