



This event is presented by the CESA 6 Special Education Department

Educational Programming and Instructional Strategies for Students with Autism Spectrum Disorder

Tuesday, February 4, 2014 • 8:30 a.m. - 3:30 p.m.

Presenter: Susan Stokes
CESA 6 Autism Consultant

Description:

This workshop will provide participants with a "best practice" approach for designing and implementing appropriate educational programs for students with autism spectrum disorder (ASD). This "best practice" approach takes into consideration the unique features and characteristics of ASD, and allows for the implementation of a variety of instructional strategies utilizing the student's strength in processing visual information. Numerous examples of how to organize various educational environments to increase comprehension and independent functioning for the student with ASD will be given. A particular focus of this workshop will be learning how to set up instructional contexts, including tasks and the environment that are conducive to the learning style of students with ASD. In addition, numerous easy to make visual instructional support strategies for immediate use will be shown to address the various features and characteristics of ASD.

Workshop Objectives:

- Develop an understanding of a "best practice" approach for designing an appropriate educational program for students with ASD.
- Learn how to effectively organize various educational environments to increase comprehension and independent functioning for students with ASD.
- Learn how to set up instructional contexts to meet the learning style of students with ASD.
- Learn how to use various visual instructional strategies to address the features and characteristics of ASD.

Who should attend?

Education and community professionals, parents and family members who support children with ASD. Special rates available for parents/family members.

Prerequisite: Prior training in understanding the features and characteristics of ASD.

For additional information contact:

Paula Starr, CESA 6 ~ pstarr@cesa6.org ~ 920-236-0567

Graduate Credit:

1 graduate credit is available through UW Oshkosh for an additional fee of \$200.00. For each credit participants must attend **two** of the autism related courses and complete the assigned coursework.

Registration Details

- **Date:** February 4, 2014
- **Registration Fee:**
 - ✓ \$185.00 per participant
 - ✓ Fee includes: materials, light continental breakfast and lunch
- **Time:** 8:30 a.m. - 3:30 p.m.
- **Onsite check-in:** 8:00 a.m. - 8:30 a.m.
- **Location:**

CESA 6 Conference Center
2300 State Road 44
Oshkosh WI 54903
- **Registration Deadline:**

October 13, 2013
- **Online registration:** http://www.cesa6.org/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 reserves the right to cancel any session due to insufficient enrollment. Participants will be notified by email or phone if a cancellation occurs.

Educational Programming and Instructional Strategies for Students with Autism Spectrum Disorder

February 4, 2014 CESA 6 \$ 185.00

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.org/prof_dev/ or send completed form to:
Paula Starr, Program Assistant, CESA 6 pstarr@cesa6.org 920-236-0567
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 _____

