

# SMART Board TM Training

# **SMART Board™ Introductory Training**

**\$150.00** per person

# October 1, 2010

Registration deadline: 9-28-2010

CESA 6—Oshkosh Office, Large Conference Room

8:45 am Registration

9:00 am —3:00 pm Workshop

### Who should attend?

- New SMART Board™ Interactive whiteboard users
- K-12 and higher education instructors who want to understand how to integrate the SMART Board ™ interactive whiteboard into their curriculum
- Anyone who wants to have a better understanding of how to use the SMART Board ™
  interactive whiteboard and Notebook software.

## What will I learn?

- How to use Notebook software to create a presentation that's enriched with graphic detail
- How to work with applications such as Microsoft Word, Excel ® and PowerPoint® on your SMART Board™ interactive whiteboard
- How to use SMART Board<sup>™</sup>Tools to quickly access functions that help you operate the interactive whiteboard more effectively

By the end of the session, you'll be comfortable with the SMART Board™ interactive whiteboard and Notebook™software, and know how to use them in your work.

Registration is also available online at www.cesa6.k12.wi.us, Click Professional Development, then click the link that says, "To see a calendar of CESA's current professional development workshops/trainings, click here. Find the workshop you want to attend and click the corresponding link. Follow the directions to register.



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.

SMART Board Training -Introductory October 1, 2010 CESA 6—Large Conference Room  Participant Name(s)		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	
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: Barb Bohn, Program Assistant, CESA 6, PO Box 2568, Oshkosh, WI 54903-2568		Expiration Date	3 Digit Code on Back of Card