

**Announcing a workshop from**



**Approved for 5.25 continuing ed clock hours for Kansas licensed speech-language pathologists by the KDHE. Sponsored by UCP/Infinitec LTS-S1180**

*Please check the website [www.myinfinitec.org](http://www.myinfinitec.org) before coming to trainings to make sure there have been no changes in location or for any weather concerns.*

# **WELCOME TO THE WRITING PAGE**

*Facilitated by: Angie Mendez , Occupational Therapist,  
Nicole Peters, Occupational Therapist*

**Thursday, November 5, 2009**

**8:30AM REGISTRATION**

**9:00am – 3:30pm**

## **Haysville Learning Center**

150 Stewart

Haysville, KS 67060

**(For Directions – 316-554-2331)**

### **Reserved for KIC Regions 5 & 6**

**Who Should Attend?** This session is designed for educators, SLPs, OTs, PTs, AT Specialists, Social Workers, paraprofessionals, administrators.

**What Is It** This full day course will explore the component of the writing process and offer a structured framework to identify tools to meet the needs of struggling writers. The training will feature a task analysis leading teams to identify tools that will meet the needs of students with disabilities. Participants will have hands-on exploration of free online or digital tools that can be used in their classrooms the very next day.

### **Outcomes**

#### **Participants will:**

- identify the various components of the typical writing process.
- analyze the writing process for students with disabilities.
- identify tools specific to student needs.
- explore online or digital tools that are readily available.

**LUNCH WILL BE ON YOUR OWN**

#### **How do I sign up? – PLEASE PRINT NEATLY**

Fee is **\$15.00 for KIC Members. (materials included).** Please send **completed registration form with check** payable to UCP at:

**Debra Eubanks, UCP/Infinitec Southwest Training Dept.**

7550 West 183<sup>rd</sup> Street

Tinley Park, IL 60477

FAX: 708/429-3981

Phone: 708/444-8460,

Peggy Zegley Ext. 247 or Debra Ext. 223

**Please Fax Registration Form to: 708-429-3981**

**atten: Debra -- By October 29<sup>th</sup>**

*This program qualifies for 5.25 hours through KDHE*

11/5/09 KIC-Writing – Regions 5 & 6

Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Organization/School District: \_\_\_\_\_

Name of Work Site/ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Business Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Email: \_\_\_\_\_

Age-level(s) served: \_\_\_\_\_ early childhood \_\_\_\_\_ elementary \_\_\_\_\_ secondary \_\_\_\_\_ adult \_\_\_\_\_ other

Accommodations/alternate formats needed (2 weeks notice requested, please): \_\_\_\_\_