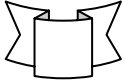
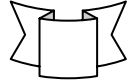


District \_\_\_\_\_ School \_\_\_\_\_ Date \_\_\_\_\_



**PROFESSIONAL DEVELOPMENT OPPORTUNITY**



WHAT:

WHERE:

WHEN:

PRESENTERS:

WHO SHOULD ATTEND:

Grade Level Focus \_\_\_\_\_

Subject Area Focus \_\_\_\_\_

Classroom Teachers \_\_\_\_\_

Specialists \_\_\_\_\_

Administrators \_\_\_\_\_

Paraprofessionals \_\_\_\_\_

Substitutes, others \_\_\_\_\_

TO REGISTER:

Contact \_\_\_\_\_

By (date) \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_

MATERIALS FEE: Cost \_\_\_\_\_

Payable to \_\_\_\_\_

Workshop material available by request to those unable to attend:

Yes \_\_\_\_\_ No \_\_\_\_\_

NOTE: Please provide copies for the SAU 53 Professional Development Committee chair/file and to all SAU 53 PDC representatives three weeks prior to workshop date.

**PLEASE POST IN FACULTY ROOM(S)**

New Hampshire Administrative Unit 53	267 Pembroke Street	Pembroke, NH 03275
Tel. (603) 485-5187	Fax (603) 485-9529	www.sau53.org