



Teaching All Kinds of Minds Program Event Registration Form



Course Information

Schools Attuned Core Course Location: _____ Assoc. Talmud Torahs - Chicago, Illinois _____

Schools Attuned Core Course Date (1st day only): _____ June 23, 2009 _____

Schools Attuned Course Registration Code (check w/Course Manager): _____

Participant Information

(Mr., Mrs., Ms., Dr.) _____ First Name: _____ Last Name: _____

Home Mailing Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country (if not US): _____

Home Phone: _____ Business Phone: _____ Ext. _____

Social Security Number: _____ E-mail: _____

Interest Type: Parent **Educator** Clinician Student Other Educational Professional

Professional Information

Educator Occupation: Classroom Teacher Instructional Aide Reading Specialist

Psychologist Principal Other School-Level Administrator District-Level Administrator

Guidance Counselor Learning Specialist/Counselor Assistant Principal

Other Occupation: _____ Years of work experience in education: _____

Main Teaching Area: Kindergarten (various subjects) Elementary (various subject) Special

Education English/Language Arts Mathematics Social Studies/History English as a Second

Language Foreign Language Visual/Performing Arts Physical Education Not Applicable

Other: _____ **Primary Grade:** _____

National Board Certified Teachers (NBCT) certification? Yes No

Grades of Students: Pre-K K-2 3-5 6-8 9-12 College

Organization/School or Employer Information

School Name: _____

Street Address: _____ City: _____ State/Province: IL Zip Code: _____

Phone: _____ Fax: _____

Additional Participant Information:

Formal Degree Completed: High School Cert Program (1-2 Year) Associate's Bachelor's

Master's Doctoral Other: _____

FAX completed form to Chani Friedman at 773-973-6666 by noon Monday, May 11, 2009