

## Connecting Classrooms, Careers and Postsecondary

### Informatics

## Summer Teacher Training Institute (STTI) 2018 Registration Form

#### REGISTRANT INFORMATION

Registrant Name \_\_\_\_\_

Are you a (Select one.)

- New AC teacher
- Returning AC teacher
- Support for the AC Teacher (instructional coach, academic partner teacher, guidance counselor, administrator)

School Email \_\_\_\_\_ Summer Email \_\_\_\_\_

Cell Phone \_\_\_\_\_

We respect your privacy. Your personal contact information will only be used to share important information regarding training.

#### SCHOOL INFORMATION (Fill in as applicable.)

School \_\_\_\_\_

District \_\_\_\_\_ State \_\_\_\_\_

Principal \_\_\_\_\_ Email \_\_\_\_\_

CTE Director \_\_\_\_\_ Email \_\_\_\_\_

Superintendent \_\_\_\_\_ Email \_\_\_\_\_

#### TRAINING SCHEDULE

- Course 1
- Course 2
- Course 3

June 20 – 23 and June 25 – 29, 2018 — Northern Kentucky University, Kentucky

#### DISTRICT/SCHOOL PAYMENT CONTACT INFORMATION

Name \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Upon submitting this registration form, your district/school will receive confirmation with an invoice.