

Registration for STAR Training

Please fax or e-mail completed forms to: Fax: (828) 262-6086 Email: morris@appstate.edu

Program Name: _____ Contact Person: _____

Phone # _____ Email _____

Dates of Training: Check the site your participants will attend.

____ Site 1: Randolph CC
August 18-20, 2010 and
October 13-15, 2010

____ Site 2: Western Piedmont
August 25-27, 2010 and
November 17-19, 2010

____ Site 3: Fayetteville Tech CC
September 29-Oct. 1, 2010 and
December 1-3, 2010

We would like to have at least two participants from each program (one lead instructor/administrator and one instructor) unless your program already has participants who completed STAR training previously. We encourage you to send a team of 3-4 participants. Please complete the information requested for each participant. Please type or print.

Participant #1: Name of lead instructor/administrator: _____

Email: _____ Phone: _____

Role (director, coordinator, instructor, test administrator): _____

Participant is committed to attending all six days of training and taking the administrative leadership role for implementing STAR in your program. (This person does not have to be an instructor):

Lead Instructor/Administrator Signature

Director Signature

Participant #2: Name of instructor: _____

Email: _____ Phone: _____

Participant is committed to attending all six days of trainings and teaching an intermediate level reading class using the STAR techniques and strategies learned during training.

Instructor Signature

Director Signature

Participant #3: Name of instructor: _____

Email: _____ Phone: _____

Participant is committed to attending all six days of trainings and teaching an intermediate level reading class using the STAR techniques and strategies learned during training.

Instructor Signature

Director Signature

Participant #4: Name of instructor: _____

Email: _____ Phone: _____

Participant is committed to attending all six days of trainings and teaching an intermediate level reading class using the STAR techniques and strategies learned during training.

Instructor Signature

Director Signature

If registering more than 4 participants submit additional registration form(s).