



**NORTH CAROLINA COMMUNITY COLLEGE SYSTEM**  
*H. Martin Lancaster, President*

January 9, 2004

**MEMORANDUM**

**To:** Presidents  
Instructional Administrators  
Student Development Administrators  
Counselors

**From:** Pamela Little  
Associate Director, Student Development Services

**Subject:** **Advisor's Training Workshop**

The System Office is pleased to announce an upcoming **Advisor's Training for Student Organizations**. This is an excellent opportunity to gain valuable information on advising student organizations on your campus.

[Who Should Attend](#)

This training is designed for all levels of advising personnel (professional advisors, counselors, faculty, and administrators) whether new or experienced you can benefit greatly from this training.

The training will provide information on Components of A Successful Advising Program.

Presenters are Mrs. Judy Gordon, College of The Albemarle, Mrs. Juliet Laughlin, Gaston College, and Mr. Scott Johnson, Wilkes Community College.

The workshop will be held in the 5<sup>th</sup> floor conference room at the System Office on Friday, February 20, 2004, from 9:00 a.m. – 3:00 p.m. Lunch will be on your own. There is no registration fee and participants will be provided with materials and handouts.

National Board for Certified Counselors (NBCC) credits will be available.

For hotel reservations, please call *Days Inn* at (919) 828-9081. Located behind the system office building.

Please see the attached agenda, and registration form. Space is limited to 60 participants and registration will be on a first-come basis. **Registration forms are due by February 6, 2004.**

cc: Dr. Delores A. Parker  
Mr. Ken Whitehurst  
Mrs. Judy Gordon  
Mrs. Juliet Laughlin  
Mr. Scott Johnson

CC04-002  
E-mail

**Advisor's Training Workshop**  
**Advisor's Training for Student Organizations**

REGISTRATION FORM

Due to limited space, we can only accommodate 60 people, so acceptance will be on a first-come, first-serve basis. **Deadline for registration is February 6, 2004.**

**Date:** \_\_\_\_\_

**College:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**ATTENDEES**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**Please send forms to:**  
**Pamela Little**  
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