

CRISS Training of Trainers

June 8 – June 11, 2020

Attendance all 4 days is required.

Location:

Washington, IL (Peoria area)

Cost: \$1500 per person

Additional costs for certification may apply.

Trainer: Ken Miller, Master Trainer

Min-Max participants: 7-12

Registration Deadlines: April 15, 2020 for minimum;
Closes May 15, 2020.

How to Register:

The registration fee of \$1500 per person is payable in advance to **EL² Project CRISS**.

Please fax or mail check, money order, purchase order, or VISA/MC/AmEx information (no cash; U.S. funds only), along with registration form to:

Project CRISS
PO Box 926
Kalispell, MT 59903

Fax: 406.758.6444
Phone: 406.758.6440
Toll Free: 877.502.7477



Participants must complete the Candidate Information Form in addition to this form!

Web www.projectcriss.com
Email info@projectcriss.com

If you have any questions regarding the workshop content, times, or location, please contact the CRISS National Office.

Prerequisites: Project CRISS Training of Trainers participation requires prior attendance an Intro to CRISS workshop (within the last 3 years) and implementation of the CRISS Frameworks for Teaching and Learning with students prior to attending.

Team Registration

School _____

District _____

District Contact _____

1. Name _____

Grade/Role _____

Phone _____

Email _____

2. Name _____

Grade/Role _____

Phone _____

Email _____

3. Name _____

Grade/Role _____

Phone _____

Email _____

4. Name _____

Grade/Role _____

Phone _____

Email _____

For certification, participants are required to attend the ENTIRE training.

Most participants will have significant evening homework to prep for presentations. Please plan accordingly.

Daily, 8:00 AM to 5:00 PM

Most likely, one or two days will be working lunches - order in or bring your own. Other days tbd. We will try to have food option information available.

Individual Registration

Name _____

School _____

District _____

Grade/Role _____

Work Phone _____

Work Address _____

Work Email _____

Home Contact Info: Phone _____

Email _____

Payment Information

- Check or Money Order
- Purchase Order # _____ (attached)
- Credit Card payments are made via PayPal. No PayPal account is required. We will email you an invoice to be paid online through PayPal's secure system.

Name of card holder: _____

Email for credit card invoice: _____

No refunds issued after May 15, 2020.

Candidate Information Form
Project CRISS Training of Trainers Workshop

Name: _____ Position: _____

Name of School District / Region: _____

Mailing address (home): _____

_____ Zip _____

Phone number: Work: _____ Home: _____

E-mail: _____

Please give the dates, location, and trainer of your Introduction to Project CRISS workshop(s). Each workshop is at least 12 hours (2 days). Do NOT put the first date of a workshop on line 1 and the second date of the same workshop on line 2. If you are scheduled to attend an Intro to CRISS workshop before the Training of Trainers, please indicate relevant info.

1. Dates: _____ Location: _____

Trainer(s): _____

2. Dates: _____ Location: _____

Trainer(s): _____

3. In the space below, please summarize how you have been implementing CRISS—include (1) grade levels, (2) content areas, and (3) **Framework for Learning** elements and strategies. How are you coordinating with other faculty or team members in your school/district?

4. In one or two paragraphs, explain how your background and experience will help you to become an effective trainer in your district (or region if you are employed by a regional educational cooperative).

READ THE FOLLOWING AND SIGN BEFORE RETURNING THIS TO CRISS

I have read the *Certified Trainer Requirements and Responsibilities*. My signature below verifies that I have met all the requirements and agreed to all the responsibilities. I understand that I must attend all 28+ hours of the 4-day training, that I should bring my CRISS training manual and student samples to share, and that I will be expected to present several CRISS presentations during the workshop. In addition, I understand that research-validated CRISS implementation requires I apprentice with an experienced CRISS trainer at an *Introduction to Project CRISS* workshop of at least 12 hours (not required for certification) and I must submit a lesson plan and reflection to complete my certification requirements.

Signature

Date

Please return this form with the registration paperwork and payment before the registration deadline to:

dfranciosi@projectcriss.com OR Fax 406.758.6444