

REGISTRATION FORM

EFFECTIVE FORMATIVE & SUMMATIVE ASSESSMENT

Personal Information

(All fields are required)

First Name: _____ Last Name: _____

Title/Position: _____

School Name: _____

School Location _____

Mobile Phone Number: _____ Phone 2: _____

Email Address: _____

Time, Date and Location

Check In/Registration: 8:00 am

Training Session: 8:30 am to 4:30 pm

Monday, June 4, 2018 and Tuesday, June 5, 2018

TSS Professional Development Center

4751 Mangels Blvd, Fairfield, CA 94534

Fees and Cancellation

Cost: \$650

(All materials included.)

Cancellations received by May 22, 2018 will be subject to a \$50 fee.

Cancellations received after May 22, 2018 and "No Shows" will be subject to the full registration fee.

All cancellations must be submitted in writing via email to info@totalschoolsolutions.net.

Method of Payment

Make check payable to: Total School Solutions
and mail to: 4751 Mangels Blvd., Fairfield, CA 94534

Please bring a laptop computer or another Internet ready device.

Your Signature: _____

I understand and accept the cancellation policy

Please complete and fax to 1 (707) 422-6494, or scan and email this form to info@totalschoolsolutions.net.