

Registration for the 6th Annual Early Childhood Summit On the Move: Supporting the Transition Process for Children and Families

Keystone Convention Center, Keystone, Colorado June 20 – June 21, 2019

CONFERENCE MEETING TIMES: June 20 – 9:00 AM - 4:00 PM, Castle Peak June 21 – 8:00 AM – 3:00 PM, Castle Peak

COST: Registration cost for the 2019 Early Childhood Summit is \$140 per person for full summit participation. Registration includes breakfast and lunch each day for paid participants only.

Summit attendance with additional team or community members is encouraged, but not required. Space is limited.

SCHOLARSHIPS: *Limited* funds are available for participants through Early Intervention (EI) Colorado, Colorado Department of Education (CDE) Preschool Team, and CO Shines Brighter Grant, CDHS.

- El Colorado scholarships are available to family members or early childhood personnel providing services to infants and toddlers receiving El services as documented on an Individualized Service Plan (IFSP)
- **CDE scholarships** are available to personnel working with preschoolers with disabilities served through an Individualized Education Program (IEP) or family members of a child receiving preschool special education services as provided through an IEP
- CO Shines Brighter: Preschool Development Grant Scholarships are available to Early Childhood Council Leaders
- The following apply to <u>all three</u> scholarships--EI Colorado, CDE Preschool, and CO Shines Brighter:
 - Please identify the scholarship request on the payment section of the registration form below and submit the registration by April 24th to be considered.
 - ✓ Individuals receiving scholarships will be notified <u>prior</u> to the Summit.
 - ✓ Scholarships for registration will be paid on the applicant's behalf prior to the Institute dates. Individuals who are awarded scholarships who do not show will not be considered for future scholarship requests.
 - ✓ Scholarships will cover the cost of the registration fee.
 - ✓ Limited funds may be available for travel and lodging through a separate application process. Contact Laura Merrill at El Colorado or Elizabeth Schroeder at CDE for details. Contact information is below.
 - ✓ Scholarships and/or funding for travel and lodging are not guaranteed. Any additional costs remain the responsibility of the registrant.

For questions regarding EI Colorado or CDE Preschool Team scholarship eligibility and selection criteria please contact: <u>EI Colorado</u>: Laura Merrill: <u>laura.merrill@state.co.us</u>, or 303-866-5379 <u>CDE Preschool</u>: Elizabeth Schroeder at <u>Schroeder e@cde.state.co.us</u> or 303-866-6783 CO Shines Brighter: Heather Craiglow at heather.craiglow@state.co.us or 303-866-4804

COLLEGE CREDITS: Optional University of Northern Colorado graduate credit (1 credit) is available for an additional charge of \$60 for full-time participation in both days of the Summit. Registration forms will be available at the Summit; participants will submit registration forms to the UNC Extended Campus at the contact information provided in the form; and will be billed for tuition by UNC upon receipt of the registration form. Please feel free to contact Rashida Banerjee, Instructor of Record, for more information: <u>Rashida.banerjee@unco.edu</u>

Space is limited. The Registration for the Summit will close on **May 1, 2019**. Individuals applying after May 1, 2019, will be placed on a waitlist and notified of acceptance based upon availability after May 17, 2019.

Confirmation of your acceptance will be sent to the email address you provide (make sure this email address is clearly written and one that you will regularly access).

LODGING: A block of rooms has been reserved with Keystone Resorts, Keystone, Colorado (Conference Village Studio, \$154/night; Conference Village 1-bedroom, \$157/night; Conference Village 2-bedroom, \$209; Conference Village 3-bedroom, \$309/night; inquire about others). *It is the participant's responsibility to contact Keystone Resorts at 1-800-258-0437 to reserve a room (A per/night per room resort fee is applicable).*

To book your lodging for the 2019 Early Childhood Summit, call Keystone Group Reservations at 800-258-0437 and refer to CP8ECS9 or view flyer at https://www.unco.edu/bresnahan-halstead/support/partnerships.aspx (scroll down)

Maps, etc. are available at http://www.keystoneresort.com/groups-and-conferences/accommodations.aspx#maps#Top

Please complete the following Registration Information. Incomplete applications will not be processed.

Registration Information

Print and mail or email completed registration form to:

Lorae Blum (lorae.blum@unco.edu) Bresnahan-Halstead Center c/o School of Special Education, McKee 29, Campus Box 141 University of Northern Colorado Greeley, CO 80639

Contact Lorae Blum by phone (970) 351-1626 or email <u>lorae.blum@unco.edu</u> if you have questions regarding your registration. For questions about UNC credits or scholarships, please see contact information on page 1 of the registration packet instructions.

Please type or print clearly, as this information will be used for further communication regarding the Summit.

| Name: | | | | | |
|---------------------------------|--|--|--|--|--|
| Mailing Address: | | | | | |
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| Preferred Email Address: | | | | | |
| Audi 655. | | | | | |
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| County Name: | | | | | |
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| Telephone: | | | | | |
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| Early Childhood Professional | Employer/Agency or affiliation, if any (e.g. CCB, program, school district, etc.): | | | | |
| Agency/Affiliation: | My <u>primary</u> role is: | | | | |
| | Family member of an infant or toddler, or preschooler | | | | |
| | Early intervention provider | | | | |
| | Early intervention service coordinator | | | | |
| | Early intervention director | | | | |
| | Early childhood special educator (School-based program) | | | | |
| | \Box Early childhood educator (Family Child Care Provider) | | | | |
| | \Box Early childhood educator (Community-based program) | | | | |
| | Early childhood administrator (Community-based program) | | | | |
| | Early childhood educator (School-based program) | | | | |
| | Early childhood administrator (School-based program) | | | | |
| | Higher education/researcher/college student Related service provider (specify) | | | | |
| | Other community partner(please specify): | | | | |
| Age Range Served: | Check all that apply: | | | | |
| 5 5 | Birth to the third birthday | | | | |
| | Preschool (3-5) | | | | |
| | □Kindergarten to third grade | | | | |
| Family Member | My child is receiving early intervention or preschool special education services | | | | |
| | □Yes □No | | | | |
| | If yes, name the Community Centered Board or school district: | | | | |
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| Scholarship Applicant | I am applying for a scholarship. | | | |
|-----------------------|--|--|--|--|
| | □Yes □No | | | |
| | (If yes, please note: Each applicant is only eligible for consideration for <u>one</u> of the following): | | | |
| | □ EI Colorado: I understand that to request this scholarship, I must be a family member of, or provider for, an infant or toddler, aged birth through the third birthday, who has an Individualized Service Plan (IFSP). | | | |
| | □ CDE Preschool : I understand that to request this scholarship, I must work with preschoolers with disabilities who have an IEP or be a family member of a child receiving preschool special education services as provided through an Individualized Education Program (IEP). | | | |
| | Project TREE : I understand that to request this scholarship, I must be a Project TREE Scholar at | | | |
| | UNC. | | | |
| | □ CO Shines Brighter: PDG: I understand that to request this scholarship, I must be an Early | | | |
| | Childhood Council Leader. | | | |

| Payment Information | | | | | | | |
|---|--|------------------|--|--|--|--|--|
| The preferred method of payment for this registration is by check (make checks payable to the University of Northern Colorado). | | | | | | | |
| Check | Check # Make checks payable to University of Northern Colorado | Amount: \$ | | | | | |
| l will be paying by VISA/MC (please print clearly) | CC # Amount to be charged: | | | | | | |
| | CVC#: Account zip code: | Expiration date: | | | | | |
| | Signature: | | | | | | |
| Purchase Order from: | | Other | | | | | |
| I am requesting a scholarship from: (Registration of \$140 only; Review specific details above for additional information on scholarships and potential travel reimbursements) | Select only <u>one</u> scholarship type: Early Intervention (EI) Colorado CDE Child Find & Preschool Special Education Project TREE CO Shines Brighter, CDHS | | | | | | |

Please note any food requirements you may have (allergies, vegetarian, etc.):

| EC Summit Commemorative T-shirt Request : | □Yes (circle one): | Small Medium | Large X-Large |
|--|--------------------|--------------|---------------|
| i onnertoquoor. | □No | | |