

25th Annual Southern California Kindergarten Conference  
February 25 and 26, 2011

**CALL FOR WORKSHOP PROPOSALS**

Each workshop may have a maximum of TWO presenters. *Please type or print clearly.* List each name as it should appear in the program. *All correspondence will be directed to Presenter #1.*

**Workshop Presenter #1:** (First Name) : \_\_\_\_\_ (Last Name): \_\_\_\_\_

Home Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Home Telephone: \_\_\_\_\_ (Mobile) \_\_\_\_\_

School Name: \_\_\_\_\_ District: \_\_\_\_\_

Company: \_\_\_\_\_ Professional Title/Position \_\_\_\_\_

Work Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Personal E-mail Address: \_\_\_\_\_ Work E-mail Address \_\_\_\_\_

Website: \_\_\_\_\_

**Workshop Presenter #2:** (First Name): \_\_\_\_\_ (Last Name): \_\_\_\_\_

Home Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Home Telephone: \_\_\_\_\_ (Mobile) \_\_\_\_\_

School Name: \_\_\_\_\_ District: \_\_\_\_\_

Company: \_\_\_\_\_ Professional Title/Position \_\_\_\_\_

Work Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Personal E-mail Address: \_\_\_\_\_ Work E-mail Address \_\_\_\_\_

Website: \_\_\_\_\_

**Presentation Category:** *Please check the one that applies to your presentation.*

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Art                            | <input type="checkbox"/> Integrated Curriculum | <input type="checkbox"/> Physical Education          |
| <input type="checkbox"/> Brain Research                 | <input type="checkbox"/> Language Arts         | <input type="checkbox"/> Science                     |
| <input type="checkbox"/> Classroom Management           | <input type="checkbox"/> Math                  | <input type="checkbox"/> Social Studies              |
| <input type="checkbox"/> Differentiated Instruction     | <input type="checkbox"/> Music/Movement        | <input type="checkbox"/> Special Education/Inclusion |
| <input type="checkbox"/> ELD                            | <input type="checkbox"/> Parent Education      | <input type="checkbox"/> Standards                   |
| <input type="checkbox"/> Independent Work Time/Workshop |  |  |

**PLEASE RETURN NO LATER THAN JULY 1, 2010 to the SCKC Office: 27734 Mansfield Court, Valencia, California 91354. Questions may be addressed to Lila Klausner at (818) 712-9531 or on her cell phone (818) 618-4113. Notification of acceptance will be sent in late August.**

Have you presented your proposed workshop before? If so, to what group, when and where?

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List two (2) references (include telephone number)

Name \_\_\_\_\_ Position \_\_\_\_\_ Telephone \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_ Telephone \_\_\_\_\_

**Title of Workshop Presentation:** (10 words or less):

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**Describe the session** in **25 words** or less in terms of concepts presented and expected outcomes. How does your presentation address California State Standards? **This description will be printed in the Registration Booklet and must match what you actually plan to present.** *NOTE: The Committee reserves the right to edit.*

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**Describe handout and workshop format:** (lecture, "make it and take it," small group activities, active participation/movement): \_\_\_\_\_

Please complete the following so that we can best accommodate your needs:

**Room Set-up Preference:** ~Please check 1<sup>st</sup> choice and 2<sup>nd</sup> choice~

Theatre \_\_\_ Round Tables \_\_\_ Classroom \_\_\_ Open Space/Perimeter Seating \_\_\_

**Workshop Size:** 50 \_\_\_ 80 \_\_\_ 100 \_\_\_ 150 \_\_\_ 250 \_\_\_

**Audio Visual:** SCKC will provide a screen and overhead projector ONLY upon request. All other A/V equipment including LCD projectors, extension cords, and computers must be supplied by or rented by the presenter at the presenter's expense. (Presenters may request a price list for additional equipment)

~Please indicate you're A/V needs below~

Overhead Projector/Screen \_\_\_ Need Screen Only \_\_\_

**I am available:** Friday Only \_\_\_ Saturday Only \_\_\_ Friday and Saturday \_\_\_

\* \* \* \* \*

\_\_\_ Send me information about being an Exhibitor.

\_\_\_ I have a product for sale: I would prefer Session B, D or Session F so that I may sell in my room after my workshop presentation.

\_\_\_ I have a product for sale: send me information about the Presenter Sales table.

**I represent (product/company):** \_\_\_\_\_

## Guidelines for Presenters

### Philosophical Statement

The Southern California Kindergarten Conference is an annual conference intended for teachers, administrators, paraprofessionals, parents, and others interested in the education of children ages 4 through 7 years.

It is designed to generate interest in the value of Early Childhood education and to stimulate discussion of current instructional practices and issues.

Emphasis is placed on developmentally sound practices for Early Childhood education and on fostering coherence and continuity in children's experiences from home through primary grades.

Through lectures, workshops, discussions, demonstrations, and exhibits, the conference aim is to present exemplary practices and materials to the Early Childhood community while fostering a critical examination of a range of philosophical viewpoints.

Legislative action, social policy, the findings of research, theories, and ideas are all studied for their implications for classroom practice.

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- ♦ Each session is scheduled for 1 hour and 15 minutes
- ♦ A handout that reflects workshop concepts is expected
- ♦ The target audience is primarily Kindergarten teachers, with some  
Preschool, first grade, and special education teachers
- ♦ No selling is allowed in the workshop unless you are assigned a "B", "D" or "F" session
- ♦ Attendees want ideas whose implementation is NOT dependent on purchasing a product