

## TRAINING FOR 2010-2011 WASC VISITING COMMITTEE CHAIRS

**Directions:** Please select a site from the list below, complete the attached registration form and return it to the WASC office.

**Time Frames:** *(Lunch will be provided. Chairs serving in Hawaii or Overseas and WASC/ACSI Representatives will meet briefly during the lunch break.)*

8:30 a.m. – 10:00 a.m.	New Chairs: <input type="checkbox"/>	first or second experience or not served since 2009 (New chairs will also attend the 10:00 a.m.–3:00 p.m. session.)
10:00 a.m. - 3:00 p.m.	All Chairs: <input type="checkbox"/>	with recent experience
	<input type="checkbox"/>	serving in Hawaii, Overseas and WASC/ACSI Representatives
3:00 p.m. – 4:30 p.m.	All Chairs: <input type="checkbox"/>	time for additional questions/clarifications

SITE NO.	DATE	LOCATION/ADDRESS	ROOM
1	October 4, 2010	Los Angeles County Office of Education 9300 Imperial Highway Downey, CA 90242	Board Room
2	October 5, 2010	Point Loma Nazarene University Mission Valley 4007 Camino Del Rio South San Diego, CA 92108	Room 206
3	October 6, 2010	Garden Grove Unified School District 10331 Stanford Avenue Garden Grove, CA 92840	Annex Room
4	October 7, 2010	University of California Extension 1200 University Avenue Riverside, CA 92507	Room D
5	October 8, 2010	Tulare County Office of Education 7000 Doe Avenue Visalia, CA 93291	Sequoia Room
6	October 11, 2010	Ventura County Office of Education 5100 Adolfo Road Camarillo, CA 93012	Salon A
7	October 13, 2010	National University 9320 Tech Center Drive Sacramento, CA 95826	Room 120 & 126
8	October 14, 2010	Willow Creek Center 1026 Mohr Lane Concord, CA 94518	Multi-use Room
9	October 15, 2010	San Mateo County Office of Education 101 Twin Dolphin Drive Redwood City, CA 94065	Pine, Oak & Laurel

If your training site selection requires that you travel an extended distance, please contact Sylvia Taylor regarding overnight lodging. Thank you.

**2010-2011 WASC VISITING COMMITTEE CHAIR TRAINING  
REGISTRATION FORM**

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9	October 15, 2010	San Mateo County Office of Education, Redwood City

*(Please see accompanying page for complete address and room number.)*

YOUR NAME: \_\_\_\_\_

SITE NUMBER SELECTED: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

NAME OF TEAM (SCHOOL) YOU WILL BE CHAIRING:

\_\_\_\_\_

**Respond to Sylvia Taylor:**

PHONE NUMBER (650) 235-8621  
E-MAIL ADDRESS: [staylor@acswasc.org](mailto:staylor@acswasc.org)  
FAX NUMBER (775) 423-2724