



Region 35

*Schaumburg Education Association
Schaumburg Educational Employees Organization*

POST-CONFERENCE WRITTEN REPORT

Name: _____

Address: _____

Home Phone: _____ **Cell Phone:** _____

Personal E-Mail: _____

Base School: _____ **Local:** **SEA** **SEEO**

What conference did you receive Region 35 funding for: _____

Location of conference: _____ **Date(s) of Conference:** _____

1. 5 things that I learned during the conference and will share out:

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

**2. I have shared this information with _____
by means of _____**

3. This was completed on: _____

4. Other comments:

Please return this form, within **30 days** of the end of the conference to:

Kara Zielinski, Region 35 Chair, Enders-Salk Elementary School