



Registration Form

FALL FORUM 2007: "Telling Our Assessment Stories: The Who, Why and How of Implementing and Reporting Assessment "

**November 2, 2007 at College of the Holy Cross, Worcester, MA
8:30 AM – 2:45 PM**

Directions: *Submit one form per person. Please complete and print this form and mail it with a check payable to "New England Educational Assessment Network" or "NEEAN" (tax ID number 04-3380742). Registration should be received by Friday, October 19, but early registration is recommended, as seating capacity is limited. You will receive e-mail confirmation and directions upon receipt of registration information.*

___ Ms. ___ Mr. ___ Dr. ___ Other (specify): _____

First Name Middle Initial Last Name

For your name badge, preferred name or nickname

Job Title Institution/Affiliation

Mailing Address

City State Zip Code

Telephone no. FAX no. E-Mail address

Registration:

_____ \$130. Conference registration fee includes New England Educational Assessment Network membership for 2007-08. For more information about NEEAN see www.neean.org.

Meals and Special Needs

Your registration fee includes a continental breakfast, mid-morning coffee break, and a lunch.

___ Yes, I will require special assistance (note: if yes, a conference coordinator will contact you).

Please mail registration form and check payable to "New England Educational Assessment Network" or "NEEAN" (tax ID number 04-3380742) by Friday, October 19, 2007 to:

**Carol Bailey Leigh
PO Box 187
Orrs Island, ME 04066**

Questions about Registration or Program?

Contact Carol Bailey Leigh,
Execdirector@neean.org
(207) 833-5362 Fax: 207-833-5377