

Strengthening families in our community

<u>Parent Engagement Training</u> Registration Form

Dates of Training: October 17 & 18, 2023

Training Location: Online

Registrant Name:	
Schooly Arimation.	
Mailing Address:	
City:	State: Zip:
Telephone:	E-mail:
Billing Address (if different from al	pove)
City:	State: Zip:
Billing Information:	
5 5	ion Package, including Parent Engagement Training, PPE Online Curriculum Quick Tips and Power Point Presentations
Total Cost = \$1,000 per Registrar	t*
*PPE reserves the right to cance	training if the minimum is not met.
Please Choose One: Registration	will not be processed without payment or purchase order.
	check payable to Practical Parent Education Order number
Please charge my (circle o	ne) Visa or Mastercard:
Number	Name on Card
Expiration Date	VIN (security code on back of card)
Signature	

Please complete this form and return to PPE via either:

- Fax: 888-789-3684
- Mail: Mary Schwartzkopf, Practical Parent Education, 2300 W. White Ave., Suite 102, McKinney, TX 75071, or
- > Email: ppe@practicalparent.org

If you have any questions, please call 877-340-6262, ext. 106. Thank You!



TRAINING NEEDS ANALYSIS

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In order for Practical Parent Education Consultant (trainer) to accomplish your team's training objectives, please have each participant complete the following and **email** it to back to **ppe@practicalparent.org**.

1.	Participant Name	
2.	Title	
3.	Email address	
4.	Work phone Number	
5.	Job assignment	
6.	What do you feel are your top 3 objectives for your job and for the training?	
7.	What do you want to get out of the training? You will be asked to answer this question during the 1^{st} part of the training.	

Thank you in advance for your help. If you have questions, feel free to call or email us.

Practical Parent Education

2300 W White Ave. Ste. 102 McKinney, TX 75071 P 877-340-6262 ~ F 888-789-3684 ppe@practicalparent.org www.practicalparent.org