



nysut Education & Learning Trust
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TRAINING IN THE NEEDS OF STUDENTS WITH AUTISM ONLINE REPORTING FORM FOR CERTIFICATION

Instructions:

Please fill out this form and send to ELT at ELT@nysut.org upon successful completion of your Autism Spectrum Disorder: Adjusting the Educational Image seminar.

NYSUT ELT will electronically report your attendance to the New York State Education Department Office of Teaching Initiatives and will retain verification of workshop completion for not less than six years from the date of the workshop.

Please print your name exactly as it currently appears on your TEACH account with the New York State Education Department:

Last Name:

First Name:

ID (SSN): X X X - X 0 - 0 0 0 0
Last 5 digits are required

Date of Birth: / /
MM DD YY

Address:

City:

State:

Zip:

Phone:

Email:

Seminar completion date:

Format:

Instructor: