

# Guidelines for Working with Students Who Are Deaf or Hard of Hearing in Virginia Public Schools

## *Training for Special Education Administrators*

**Wednesday, May 21, 2008**

Wyndham Virginia Beach Oceanfront Hotel  
5700 Atlantic Avenue  
Virginia Beach, VA 23451

8:00 a.m. - 11:30 a.m.

Continental breakfast and boxed lunch will be provided.

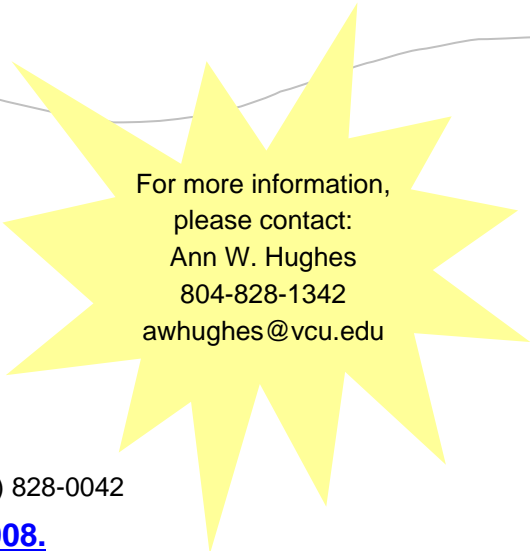
Virginia Special Education Administrators are invited to attend a 3-hour training to become familiar with the recently revised *Guidelines for Working with Students Who Are Deaf or Hard of Hearing in Virginia Public Schools*. Attendees will receive:

- A copy of the *Guidelines*;
- An overview of school divisions' obligations and best practice in meeting the needs of students who are deaf or hard of hearing. Focus on: language and literacy, assessment, roles and responsibilities of personnel, and technology;
- A copy of the NASDSE document, *Meeting the Needs of Students Who Are Deaf or Hard of Hearing: Educational Services Guidelines* with a comparison of the NASDSE and VDOE documents; and,
- A review of specific tools and resources including a sample Communication Plan which may be used to develop an effective IEP for a student whose disability category is Hearing Impaired.

### **Just before the VCASE Conference!**

Come in the night before VCASE and stay at the state rate of \$87.00 plus tax for Tuesday only. For a reservation, call 757-428-7025 and identify yourself as "part of the VDOE subsegment of VCASE."

(Note: Hotel reservations for this event must be made by April 20, 2008 to obtain the state rate.)



For more information,  
please contact:  
Ann W. Hughes  
804-828-1342  
awhughes@vcu.edu

**Register online at:** [www.vcu.edu/partnership](http://www.vcu.edu/partnership)

Under PROFESSIONALS & PROVIDERS

Click on "Calendar of Events."

Scroll to: "Guidelines Training"

. . . or return this form via Email or Fax to: Kristen Stahr, [khstahr@vcu.edu](mailto:khstahr@vcu.edu) (804) 828-0042

**[Registration Deadline: May 7, 2008.](#)**



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### Registration Form

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_ School Division: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone (     ) \_\_\_\_\_

Special accommodations and Dietary Needs: \_\_\_\_\_

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