

Legislative Wrap-Up of the 2012 General Assembly

What Happened and What Are the Implications for your School District?

Tuesday, May 15, 2012 • 9:00 AM - 11:00 AM
Legislative Office Building, Room 2A, Hartford

Plan to attend this CABE briefing on new laws, regulations, administrative activities and court decisions that will require action by your local or regional school district.

What Happened

To be discussed:

- **SB 24 An Act Concerning Education**
Competitiveness - What Was Proposed and
What Was Adopted
- **Education Funding - State and Federal**

Presenters:

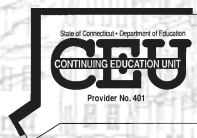
- **Patrice A. McCarthy**, Deputy Director
and General Counsel, CABE
- **Sheila McKay**, Senior Staff Associate
for Government Relations, CABE
- **Kelly B. Moyher**, Senior Staff Attorney, CABE

CEU credits: .2

Academy credits - 1

Core Areas for CBEM: School Law, Labor Relations

Core Areas for MBEM: School Law, Labor Relations



"HOT" Legal Issue

- **Free Speech**

By attending this workshop you will:

- **Learn how new legislation will impact your school district**
- **Be briefed on new laws, regulations and court decisions**

Who should attend:

- **Board Members**
- **Superintendents**
- **Principals**
- **Assistant Superintendents**
- **Business Managers**
- **Other Administrators**

Directions to the Legislative Office Building:

www.cabe.org/uploaded/Directions/

[Directions_to_the_Legislative_Office_Building.pdf](#)

☐ Yes, I will attend the **Legislative Wrap-Up Workshop** on **May 15, 2012** at the Legislative Office Building, Room 2A.

Name _____ Address _____

City _____ State _____ Zip Code _____ District _____

Position _____ Daytime Phone _____ Email address _____

Fee: ☐ CABE Express Member — FREE ☐ \$60 per person (CABE member district) ☐ \$180 per person (Nonmember district)

Registrations must be accompanied by a purchase order or payment. Payment – three easy ways to pay:

Check, credit card or purchase order. ☐ Check enclosed. ☐ P.O. # _____ ☐ Visa ☐ MasterCard

Credit Card No: _____ Expiration Date: _____

Name _____

(as it appears on credit card)

Street address _____

(billing address)

Credit card authorization: I agree to pay the total amount according to the card use agreement.

Signature: _____

Please let us know of any special requirements you have. Registration/Cancellation Deadline: May 8, 2012. Cancellations made within 5 working days of the program date will be charged \$10. No-shows will be charged full fee. **Return this form to:** CABE, Board Member Academy, 81 Wolcott Hill Rd., Wethersfield, CT 0610 or call to register at 860-571-7446, 800-317-0033, Fax # 860-571-7452. **You can also register on the CABE website: www.cabe.org**