



*Application*  
**Mobile Science Lab Teacher-Training Workshops**  
Summer 2006

Name \_\_\_\_\_  
Please Print Clearly

**School Contact Information**

School Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

**Summer Contact Information**

Street Address \_\_\_\_\_  
City \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

Grade(s) you teach: \_\_\_\_\_  
Classes you teach: \_\_\_\_\_

Rank-order the following workshops (1 and 2). Please **ONLY** rank those workshops you are committed to attending if you are selected.

Comments:

June 5-9, BHSU

June 19-23, SDSU

**DEADLINE FOR RECEIPT OF THIS APPLICATION IS APRIL 5, 2006.**

SEND THIS APPLICATION TO CATHY BERGEY VIA

Fax: (605) 642 - 6871

E-mail: [cathybergey@bhsu.edu](mailto:cathybergey@bhsu.edu)

Or Mail: CAMSE, Black Hills State University, 1200 University Unit 9005,  
Spearfish, SD 57799-9005