Training in Autism Spectrum Disorders
Request Form

The Center for Autism and Related Disabilities offers training at no cost to school districts, community agencies, and parent groups in the following New York counties: Schenectady, Schoharie, Fulton, Montgomery, Saratoga, Warren, Washington, Hamilton, Albany, Rensselaer, Columbia, and Greene. Each training topic lasts approximately 2 hours and follows a lecture format. Please review and choose from the enclosed list of topics and descriptions. Training Request Forms must be received at least 30 days prior to the requested training date.

Training for school districts and community agencies:

Trainings conducted for school and community agency personnel are provided during the workday. The trainings are open to personnel who are working with or anticipate working with children with an autism spectrum disorder. The minimum amount of attendees for school trainings is 15-20. Trainings may be cancelled by CARD if less than 15 people are scheduled to attend.

Please secure attendees and location before contacting the Center for Autism and Related Disabilities. We strongly encourage the person scheduling the training to share the list of topics and descriptions with the participants prior to submitting a training request. A list of attendees scheduled to attend the training must be sent to CARD at least three days prior to the scheduled training.

Trainings for parent groups:

Trainings conducted for parent groups are provided during the workday or weekday evenings. The trainings are open to parents and family members of children with autism spectrum disorders. The minimum amount of attendees is 5 parents. Trainings may be cancelled by CARD if less than 5 parents are scheduled to attend.

Audiovisual equipment requirement:

The presenter will bring a laptop and a LCD projector. We ask that the training site provide a screen and a wireless microphone (if there are more than 50 participants).

- Please be aware that by registering for trainings with the Center, personnel in neighboring school districts are also invited.

- Due to confidentiality issues, personnel from CARD will not be able to discuss individual students. If you are interested in a more in-depth training with technical assistance regarding individual students, please review our Autism Training Initiative on our website.
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**Applicant Information**

School District, Agency, or Parent group: 

Address:  

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<th>Street Address</th>
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<tbody>
<tr>
<td>City</td>
<td>State</td>
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Phone: (    )  
Fax (    )  
E-mail: 

Contact person/position: 

**Location of Training**

Building: 

Address:  

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**Training Request**

Training Requested:  

Date Requested: 

*(please list three possible dates)*  

Time Preference: 

**Demographic and Participant Information**

Number of students classified with an autism spectrum disorder: 

Grade level(s) of the students with an autism spectrum disorder: 

Setting: inclusion classroom or self-contained classroom 

Student’s primary means of communication:  

- Verbal  
- Non-Verbal  
- Augmentative  

Please specify: 

Target Audience: 

Anticipated number of attendees: 

Participant’s level of knowledge of autism spectrum disorders:  

- Beginner  
- Intermediate  
- Advanced  

Specific information/questions that the participants are seeking: 

College of Arts and Sciences
Department of Psychology
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(518) 442-2574  (518) 442-4834 (fax)
www.albany.edu/psy/autism