

Association of Mathematics Teachers of New Jersey

The AMTNJ promotes learning and teaching of mathematics to all grade levels. One way this is achieved is through activities that provide a medium for an exchange of views regarding the teaching of mathematics. The Association encourages an active interest in mathematics and professional involvement of teachers at all levels of mathematics education and seeks to provide opportunities for members of AMTNJ to become involved and influential in all facets of mathematics and mathematics education.

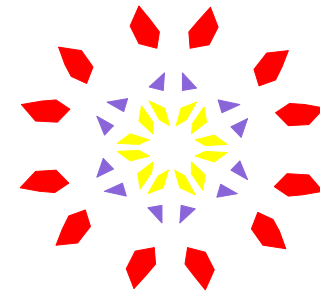
AMTNJ
PO Box 7
Glassboro, NJ 08028
856-358-4373
Fax: 856-358-4374
amtnj@juno.org

**Send email questions regarding
The Outreach workshops to**
bvandenbergh@optonline.net

If needed, call cell # 732-794-5711 on the
day of conference.

Association of Mathematics Teachers of New Jersey

Outreach Programs



**Making Use of the
SMARTBOARD in the
Mathematics Classroom**

March 11, 2010

Making Use of a SMART™ Board in the Mathematics Classroom

Presenter: Linda Treilman

Grades 5-8

This workshop will use Smart Technologies Notebook 10 software. The focus will be on topics in middle school mathematics programs. A SMART™ Board enlivens the classroom and engages middle schoolers in learning mathematics. Many ideas to add a visual representation to the mathematics you are teaching. See many of the features in version 10. Make use of the tools in the Lesson Activity Toolkit.

Time

Registration and refreshments are from 3:00 to 3:30 PM.

The workshop is from **3:30 to 5:30PM**.

Professional development certificates will be distributed.

Cost

\$25 for non-members

\$15 for members

Mail the attached registration to:

AMTNJ

PO Box 7 Glassboro, NJ 08028

Registrations must be received **10 days** prior to the workshop.

Address

Use *Mapquest* for directions.

Spring Lake Heights

Monmouth County

Spring Lake Heights Elementary School

1110 Highway 71

Spring Lake Heights, NJ 07762

AMTNJ Outreach- March 11, 2010

Registration (please print)

Name: _____

Street Address: _____

City, State, Zip: _____

Telephone where you can be reached: _____

School or District _____

Grade Level(s)- _____

Technology level-
novice ___intermediate___advanced _____

School address, city state, zip

E-mail address: _____

Title- _____

Host site- _____

Send registrations and checks to: **AMTNJ
Outreach
PO Box 7
Glassboro, NJ 08028**

Payment ENCLOSED:
 Check Money Order
 Purchase Order # _____

***Make all checks payable to
AMTNJ***