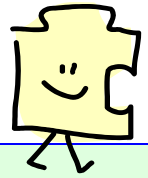




# LITTLE FRIENDS CENTER FOR AUTISM AUTISM TRAINING



## 2010 WINTER/SPRING SCHEDULE

All trainings are  
scheduled from:  
**2:30 – 4:30 p.m.**  
(UNLESS SPECIFIED)

Location:

**Little Friends  
Center for Autism**

(UNLESS SPECIFIED)

140 N. Wright St.

Naperville, IL 60540

3<sup>rd</sup> Flr (If special accommodations are  
needed, please contact us.)

**(630) 305-4196**

**Fax: (630) 305-4785**

e: kronan@lilfriends.com

**COST: \$38 PER PRSN/TRNG**

(UNLESS SPECIFIED)

**CEU's/CPDU's PROVIDED!!!**

### For PARENTS & PROFESSIONALS!!!!

- 1/26 Positive Proactive Prog. for Ind. w/ Behavior Prob. (1 of 2) by Patti Boheme **L1**
- 1/28 Positive Proactive Prog. for Ind. w/ Behavior Prob. (2 of 2) by Patti Boheme **L1**
- 2/2 Understanding ASD & Trtmnt Strtgs (1 of 2) by Patti Boheme **Level 1**
- 2/9 Understanding ASD & Trtmnt Strtgs (2 of 2) by Patti Boheme **Level 1**
- 2/11 Communicative Functions of Behavior by Mary Crissman **Level 1**
- 2/17 Communication Training (Part 1 of 2) by Kathy Evangelista **Level 1**  
(PECS + Communication Approaches will be reviewed)
- 2/18 Communication Training (Part 2 of 2) by Kathy Evangelista **Level 1**  
(PECS + Communication Approaches will be reviewed) - **\*Attend Pt 1 before Pt 2\***
- 2/23 & 2/25 Structured Teaching (TEACCH) (Parts 1 & 2) by Patti Boheme  
**COST: \$105/prsn – 2:30 – 5:00 p.m. (both days)**  
(Maximum 25 participants – **MUST ATTEND BOTH DAYS**) **Level 1**  
(Basic materials will be provided for the **Make and Take** on Day 2)
- 3/2 Parent's Perspective by Carol Paske **Level 1**
- 3/09 Char. & Beh. Issues in Ind. w/ Asperger's (Part 1 of 2) by Dr. Brouillard **L1**
- 3/11 Char. & Beh. Issues in Ind. w/ Asperger's (Part 2 of 2) by Dr. Brouillard **L1**  
**\*Please Attend Pt 1 before Pt 2\***
- 3/16 Visual Strategies by Mary Crissman **Level 1**
- 3/18 Sensory Processing by Dr. Kim Bryze **Level 1**
- 3/22 Organizational Supports for High-Funct. Autism by Kathy Evangelista
- 3/24 Testing Children w/ Autism Using Visual Supports by Dr. Cynthia Brouillard
- 4/08 Tchng Indpdnt Skills Using Nonverbal Prompts P. Boheme & M. Crissman **L1**
- 4/14 Social Language Strategies Wrkshp by Kathy Evangelista & Gabrielle Fender
- 5/4 New/Practical Ways of Thinking about Sensory Issues (1 of 2) by Dr. Kim Bryze
- 5/6 New/Practical Ways of Thinking about Sensory Issues (2 of 2) by Dr. Kim Bryze
- 5/11 Teaching Personal Boundaries to Indv. with Autism by Mary Crissman
- 5/25 Walk in My Autism by Mary Crissman

Payment and registration form must be received one week prior to training date in order to attend. If you do not receive confirmation within 2 weeks contact Kelly.

### REGISTRATION FORM -

**SPECIFY DATE/TITLE OF TRAINING(S) COST: \$38 per person / training (refunds not available)**

Contact person:	Address:
Agency name (if applicable):	Phone:
E-mail to receive confirmation: (If you wish to be notified of future trainings)	# of parents attending: _____ # of staff/professionals attending: _____
<b>PAYMENT METHOD (MUST be enclosed)</b>	<b>Credit Card:</b>
Credit card amount: _____	(circle one) VISA MC AMEX DISC (other, specify) _____
Amount of check enclosed: _____ (Make payment to <b>LITTLE FRIENDS CENTER FOR AUTISM.</b> & write, "Training," in the memo section.)	Credit Card # _____ Exp Date _____ Security Code _____ (3-digit number on back of card)

Payment and registration form must be received one week prior to training date at: LFCA / ATTN: Kelly  
1001 E. Chicago Ave., Suite 151, Naperville, IL 60540 or sent to a private fax: (630) 305-4785.