



**WACE
Chief Academic Officer Colloquium**

"The Transformational Power of Experiential Education"

Hosted by Dr. Nancy Zimpher, SUNY Chancellor

**Academic Integration
Exemplary Practices
Faculty Engagement
Institutional Impact**

Organized By
WACE Planning Committee

SUNY Global Center
116 E. 55th Street
New York, New York

March 5, 2015



WACE CAO COLLOQUIUM REGISTRATION

E-Mail Address:

Please select here if this is your first WACE event:

Yes, this is my first WACE event.

No, I have attended a previous WACE event.

Honorific:

Name:

Position:

Institution Name:

Institution Mailing Address:

City:

State / Province:

Country:

Postal Code:

Telephone Number:

DOMESTIC

Internships

Cooperative Education

Work-Integrated Learning Simulations

Service-Learning / Community Service

Undergraduate Research

Community-based Research

Project / Problem-based Learning

Other (Please Describe)

Current

Anticipated

A Priority for Planning

Current

Anticipated

Priority for Planning

Current

Anticipated

Priority for Planning

Current

Anticipated

Priority for Planning

Current

Anticipated

Priority for Planning

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Priority for Planning

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Anticipated

Priority for Planning

Current

Anticipated

Priority for Planning

INTERNATIONAL

	Current	Anticipated	A Priority for Planning
Global Partnerships	Current	Anticipated	Priority for Planning
Study Abroad	Current	Anticipated	Priority for Planning
International SL / Community Service	Current	Anticipated	Priority for Planning
International Internships	Current	Anticipated	Priority for Planning
International Cooperative Education	Current	Anticipated	Priority for Planning
International Exchanges	Current	Anticipated	Priority for Planning
Other (Please Describe)			

REGISTRATION FEE

COLLOQUIUM REGISTRATION FEE (per person): \$225.00

(fee includes light breakfast, all breaks, luncheon and champagne reception)

PAYMENT METHOD

(ATTENTION: Payment by Credit Card REQUIRES ALL BILLING ADDRESS INFORMATION TO BE COMPLETED!)

Please Select Desired Form of Payment:
(See Instruction Below Regarding Payments)

Credit Card Number (MasterCard or Visa Only):

Expiration Date (mm/yyyy):

Name on Card:

Billing Address:

(If different from above Mailing Address)

City:

State / Province:

Country:

Postal Code:

World Association for Cooperative Education WACE
WACE Federal Tax ID # 04-3279172

If Paying by Check Send Registration Form and Payment to:

WACE
Suite 125
600 Suffolk Street
Lowell, MA 01854
USA

Attn: Marty Ford, WACE Director of Global Partnerships & Programs

Please make checks payable to: WACE

For Bank Transfer, please contact the WACE Secretariat for our banking information at
Marty_Ford@uml.edu

Should you have any questions, please contact Marty at Marty_Ford@uml.edu