

*Division of Teacher Education and Licensure
Virginia Department of Education
P. O. Box 2120
Richmond, Virginia 21218-2120*



SCHOOL LEADERSHIP WORKSHOP RESPONSE FORM

Tuesday, March 31, 2009
Marriott Richmond West Hotel
4240 Dominion Boulevard
Glen Allen, Virginia 23060

Name: _____

Name for Nametag: _____

Title: _____

School Division or College/University: _____

Address: _____

Phone Number: _____

E-mail Address: _____

Fax Number: _____

Please Respond:

- Yes. I plan to attend the school leadership workshop on March 31, 2009.
- No. I do not plan to attend the workshop.

HOTEL ACCOMMODATIONS (only if traveling more than two hours):

Please Respond:

- Yes. I am requesting a hotel room for the evening of March 30, 2009.
Please indicate smoking or nonsmoking: Nonsmoking Smoking
- No. I do not need hotel accommodations.

PLEASE RETURN THE FORM NO LATER THAN NOON ON MARCH 9, 2009, TO:

Dr. James W. Lanham
Division of Teacher Education and Licensure
Virginia Department of Education
P. O. Box 2120
Richmond, VA 23218-2120
(804) 786-6759 (FAX)

For hotel information and driving directions, visit:
<http://www.marriott.com/hotels/travel/ricmw-richmond-marriott-west/>