

Foundation Series Workshops

Enhancing productivity with balanced technology management



Successful Schools

Diminishing Returns: Increasing Profits in the Classroom



Overview

ADHD, Autism, Fetal Alcohol Syndrome, Developmental Delay, Developmental Coordination Disorder, Learning Disability, Sensory Processing Disorder, Reactive Attachment Disorder, Depression, Anxiety, Technology Addictions... *today's students* are different! Technology overuse is resulting in disabilities that the health and education systems are only beginning to detect, much less understand. Printing, reading and attention delays are the norm, with an ever widening gap in skill performance. With a ranking of 15th on the world stage for literacy, Canadian and U.S. schools are faced with making crucial decisions regarding changes to not only classroom, gym and recess environments, but also to curriculum programming, teacher education, as well as revisions to school policies and structures. The educational empire is on the decline, as returns on investments in education of children continue to diminish.

Goal

Diminishing Returns raises awareness regarding the diversity of today's student population, and offers specific and immediate solutions that parents, teachers, principals and government can implement in order to adequately address this growing concern.

Learning Outcomes

- Identify child diagnoses, and describe how the current education system fails to meet the needs of these children.
- Evaluate how school environments and teaching styles limit learning and achieving literacy.
- Identify restructuring plans for classrooms, gyms and playgrounds to improve productivity and academic performance.
- Create Zone'in Stations in classrooms, gyms and playgrounds.

Handouts

Productivity Designs for Classroom and Gym

Inner Drive Directive for Schools

Zone'in Gym Station Instructions



Evidence based – Research referenced - Strategy focused

Creator and Speaker

Workshop creator **Cris Rowan** is a well-known speaker and author to teachers, parents and therapists throughout North America in the field of sensory integration, learning, attention, fine motor skills and the impact of technology on children's neurological development. Cris has Bachelor of Science degrees in both Occupational Therapy and in Biology, and is a SIPT certified Pediatric Sensory Specialist. Cris is CEO of Zone'in Programs Inc. offering products, workshops and training to promote technology balance and enhance productivity. Cris is creator of the new *Zone'in*, *Move'in* and *Unplug'in* programs, the Foundation Series Workshops and Zone'in Training for therapists. Cris has authored the *Unplug – Don't Drug, Creating Sustainable Futures*, and *Linking Corporations to Communities* initiatives, and *Virtual Child – The terrifying truth about what technology is doing to children* book.



Who should attend?

Parents, teachers, administrators, special education staff, occupational therapists, speech and language pathologists, physical therapists, counsellors, physicians, psychologists, psychiatrists, social workers and child care providers. Foundation Series Workshops are designed to be *introductory* level for therapists, *intermediate* for teachers and *advanced* for parents, child care workers and teaching assistants.

How to register

Register for our Foundation Series Workshops:

1. **Online** at www.zoneinworkshops.com
2. **Faxing** this form to 1-877-8zonein
3. **Phoning** 1-888-8zonein
4. **Emailing** info@zonein.ca
5. **Mailing** Zone'in at 6840 Seaview Rd, Sechelt, BC Canada V0N3A4

Sponsor a workshop in your own community and receive a free *Zone'in*, *Move'in* or *Unplug'in* program for school or home use. Contact Amy for the details!

To register, please complete and forward the following form.

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Workshop Title: _____

Workshop Date: _____ **Workshop Location:** _____

Name: _____ Occupation: _____

Address: _____

Daytime Phone: _____ Fax: _____ Email: _____

Method of Payment:

Cheque (made payable to "Zone'in Programs Inc.")

MasterCard No. _____ Exp _____ Cardholder Name: _____

VISA Card No. _____ Exp _____ Cardholder Name: _____