

Northeast Region Spring Conference

Wednesday, March 22

Springvale Golf Course & Ballroom, 5871 Canterbury Road, North
Olmsted, 44070 • (440) 777-0678

Program

5 p.m. Networking

6:15 p.m. Welcome

*Terry Groden, Northeast Region president;
board member, North Olmsted City*

Pledge of Allegiance

*Thomas F. Brophy, Northeast Region
immediate past president; board member,
Wellsville Local (Columbiana)*

Invocation

6:25 p.m. Dinner

7 p.m. Entertainment

*North Olmsted City's North Olmsted High
School Choir and Band*

7:15 p.m. Program

Introductions

Terry Groden

Greetings and update from OSBA

*Denise Baba, OSBA president; board
member, Streetsboro City; and Richard
Lewis, OSBA executive director*

Legislative update

*Jennifer Hogue, lobbyist,
OSBA*

Presentation of awards

- Ohio Teacher of the Year nominees
- Award of Achievement recipients
- Master Board Member awards
- Veteran Board Member awards
- Northeast Region Blue Ribbon Schools

President's Award of Excellence

Terry Groden

8:30 p.m. Adjourn

Authority for reimbursement

Ohio Revised Code Section 3315.15 authorizes the establishment of a service fund for board members. Such funds can be used for expenses incurred for meetings such as this.

Award of Achievement

This conference entitles board members to five Award of Achievement credits.

Reservations

The cost to attend is \$35 each for OSBA members, guests and spouses, which covers the cost of the meal. You may make your reservation online at <http://links.ohioschoolboards.org/nspring2017> or email your reservation to **Melanie Price** at mprice@ohioschoolboards.org. Please make checks payable to **Ohio School Boards Association** and send the reservation form to **Melanie Price**, senior administrative assistant of communication services, Ohio School Boards Association, 8050 N. High St., Ste. 100, Columbus, OH 43235. The deadline to RSVP is Friday, March 17. Please include payment or a purchase order number with reservation. Individuals who cancel by Friday, March 17 may request a full refund. All others will be charged the full fee.

Enclosed is a check for \$ _____ and/or purchase order number _____ to cover _____ reservations.

District/county _____

Name, title _____

Name, title _____

Name, title _____

Name, title _____



_____ Check here if you require special accommodations. Attach a written description of needs. (Please photocopy this form for additional reservations.)