



Dr. Nelson Ying Tri Region  
 Science and Engineering Fair  
**PROFESSIONAL DEVELOPMENT  
 WORKSHOP APPLICATION**

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ NY Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Verify E-mail: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_

Work Phone: \_\_\_\_\_

I wish to register for the following workshop:

- Elementary and middle school faculty      SATURDAY      9:00-11:00 a.m.
- High school and pre-service college faculty      SATURDAY      3:00-5:00 p.m.
- College faculty and professional engineers      SUNDAY      9:00-11:00 a.m.



Submit this form to:  
 Ying TRSEF, 604 Walberta Rd, Syracuse, NY 13219  
 315.487.7623 fax  
 trsef@verizon.net

**Dr. Nelson Ying Tri Region Science and Engineering Fair**

Mary Eileen Wood, Director Ying TRSEF, Advisory Council Member ISEF  
 trsef@verizon.net  
 315.468.1025 office 315.487.7623

604 Walberta Road  
 Syracuse NY 13219  
 www.trsef.org

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