



# Join our Mailing List!

## For Professionals Working with Deaf and Hard-of-Hearing Students

Join our mailing list to receive information about news and events from the Center for Outreach Services at the Ohio School for the Deaf.

Name: \_\_\_\_\_  New  Change of address/update Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Title: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

School District/Agency (where you work): \_\_\_\_\_ County: \_\_\_\_\_

Which mailing list(s) would you like to join? (please check all that apply):

- K-12 Educators
- Early Childhood (0-3)/Pre-School Educators
- Interpreting & Sign Language Resources
- Administrators

What is your primary role working with Deaf and hard-of-hearing students? (please check one box)

- Teacher – Deaf Education
- Teacher – Special Education
- Teacher – General Education (K-12)
- Teacher – General Education (Early Childhood)
- Educational Interpreter
- Speech Language Pathologist
- Audiologist
- Administrator
- Parent Mentor
- Regional Infant Program Personnel
- Interpreter training program faculty
- Interpreting student  
Anticipated graduation date: \_\_\_\_\_
- Deaf education faculty
- Deaf education student  
Anticipated graduation date: \_\_\_\_\_
- Other: \_\_\_\_\_

**NOTE:** We want to respect your privacy while helping you connect to useful information. The Center for Outreach Services may occasionally share its mailing list with other educational, non-profit or deafness-related organizations of interest to professionals working with students who are deaf and hard-of-hearing. If you do NOT wish to have all or parts of your address information shared, please check the appropriate boxes:

Do NOT distribute:  my phone number  my email address  ANY of my information

Individuals on our mailing list can receive a State Library of Ohio card with the special privilege of having borrowed items mailed to you, including items from the extensive Deafness collection.

Would you like a State Library of Ohio card?  yes  no

*Please help us by completing this optional demographic information. Check all that apply.*

Education (highest completed)  High School  College Highest completed: \_\_\_\_\_

Credentials  ODE: \_\_\_\_\_  Other: \_\_\_\_\_

Grades Served  0 – 3 yrs  Pre-K  Elementary  Middle School  High School  Other: \_\_\_\_\_

How are deaf and hard-of-hearing students currently served in your school?

Mainstreamed  Self-contained classroom  Resource room  Other: \_\_\_\_\_

How many students who are deaf or hard of hearing attend your school?

1  2 – 5  6 – 10  11 – 20  Over 20

Send completed form to:	Center for Outreach Services - Survey
Fax: 614.728.1406	Ohio School for the Deaf
Email: OutreachCenter@osd.oh.gov	500 Morse Road
	Columbus OH 43214