## 3- Hour Workshop

# Tools for Makers and Creators

### **TARGET AUDIENCE:**

All Teachers, Coordinators,
Principals and Heads

**Date:** December 27, 2019 **Time:** 3: 00 to 6:00pm

Fee for Members: PKR 2,300/-

Fee for Non-members: PKR 2,700/-

Limited seats on first come, first served basis

Training material, certificates and tea/refreshment will be provided

SPELT reserves the right to make changes to the session as and if required.

### Venue:

**SPELT House:** No. 101 First Floor Plot No. C-28 Kh-e-Ittehad, Lane 12 Phase II Ext. D.H.A, Karachi

**Mobile No:** 0333-3754250, **Telephone No** (0213) 5313731, 33, 34



In this session you will be shown some of the basic tools for making and creating using the Google Suite. This session will be focused on Google Drive, Google Docs and Google Forms. You will be prompted to create a quiz, create a shared Google doc and respond to comments and feedback collaboratively. You will also be shown some organization skills that you can adapt for your own needs.

**NOTE:** THE PARTICIPANTS ARE REQUIRED TO BRING THEIR LAPTOPS FOR HAND-ON WORK.



Adnan Iftikhar is the Director of Technology at Lick-Wilmerding High School, San Francisco, CA. He is certified as a Google Certified Innovator, Google Educator Level 1 and 2, Certified EQ Educator & Practitioner. Adnan has founded a non-profit, a brick and mortar business, a software consulting business, several online businesses and a school.

Adnan Iftikhar has been working in independent schools in US for 25 years. He has spoken at events across the US and internationally. Most recently, he delivered a Keynote at an

Alibaba Summit in Xiamen, China.



## **REGISTRATION FORM**

**Receipt No:-**

# **Tools for Makers and Creators**

Date: December 27, 2019

Facilitator: Adnan Iftikhar

## PLEASE USE BLOCK LETTERS TO COMPLETE THE FORM

| Name:                                 |                              |   |
|---------------------------------------|------------------------------|---|
| Name of Institution:                  |                              |   |
| Institution Address:                  |                              |   |
| Contact No:                           | E-mail:                      |   |
|                                       |                              | _ |
| Home Address:                         |                              |   |
| Mobile No:                            | E-mail:                      |   |
|                                       |                              |   |
|                                       |                              |   |
| Professional Qualifications:          |                              |   |
| Experience of Teaching Level (s) peri | iod                          |   |
| Please write briefly what your expec  | ctations of this course are: |   |
|                                       |                              |   |
|                                       |                              |   |
| Fee: Non-Refur                        | ndable                       |   |
| rec. Itali                            |                              |   |

Applicant's Signature & Date

#### **HEAD OFFICE**