

2024 Texas School Records Management Academy

The annual Texas School Records Management Academy provides a comprehensive look at relevant topics including open records requests, case law in Texas, FERPA, records management, and more. Examine current events, recent legislation, state and federal guidelines, and best practices to successfully navigate the landscape of Texas schools. **CEU 9/CPE 10.5**

Topics for this event typically include:

- Public Information Requests
- Records Management Session by TSLAC

- Electronic Records Retention
- And much more!

Wednesday and Thursday, April 10 and 11, 2024 Day 1: 8:45 AM to 4:45 PM | Day 2: 8:55 AM to 12:30 PM

Austin Marriott North 2600 La Frontera Blvd, Round Rock, TX 78681

FEE: \$335 Member | \$385 Non-Member PREREQUISITE: None

LUNCH: Provided by TASBO on Day 1 CEU/CPE Hours: 9/10.5

BOOK YOUR HOTEL: <u>Book your sleeping room online</u> at the TASBO room rate of \$129. Block closes March 26, 2024 or when sold out. Self-parking is complimentary.

CONDITIONS: Satisfactory meeting room temperatures are difficult to maintain. Always bring a sweater or jacket to ensure comfort. Business casual attire is acceptable.

ABOUT TASBO EVENTS: Seating is limited, so register early. If you or (someone attending with you) need ADA assistance to participate, please call us at 512-462-1711.

CANCELLATION POLICY: Cancellations are only accepted in writing. Cancellations received seven (7) working days before the event are cancelled in full, those received one (1) to six (6) working days before the event are cancelled at 50 percent, and cancellations are not accepted the day of or after the event. If you do not cancel and/or do not attend, you are still responsible for payment. If TASBO cancels an event, you will be refunded in full.

Register online at TASBO.org or return completed form by:

Mail: 5920 W. William Cannon, Building 1,	Fax: 512.462.1782	Email: register@tasbo.org (DO NOT email credit
Suite 200, Austin, TX 78749		card info. Contact us for payment)

Please PRINT clearly Name:		Title:		
District/Employer				
Contact Phone:		Email:		
Payment Method:	PC _	Check Erosed	Credit Card	

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