



American Sign Language Workshop

VISUALIZE THIS: Drawing in Space with ASL Classifiers with Trix Bruce

November 14, 2007
6 p.m. to 9 p.m.

The University of Akron
Student Union Room 312

As a native English speaker you work within a linear language, but ASL uses space and movement through classifiers to show a visual picture. When using classifiers, are you able to clearly portray the English message in ASL? Do you know how to clearly show a car accident, a Lasik eye surgery, or a gymnast going through their routines? This workshop provides participants with an overview of using classifiers, by focusing on what they mean, when to use them and how they are used. Participants will explore various classifiers to express a visual picture breaking away from English words to translate ideas visually. This workshop strongly focuses on ASL storytelling, ASL performing, and ideas on how to use the appropriate hand shape to show a clearer picture of the context involved.

This workshop will also provide hands-on experience and skill building activities needed for appropriate classifier use applied to complex descriptions and images. Complicated and confusing pictures, eye gaze, role shifting, spatial referencing and appropriate use of classifiers in storytelling will also be presented. Emphasis is placed on developing the ability to think in pictures as a way to improve expressive and receptive communication skills.

REGISTRATION FEE*: \$40 per participant, postmarked by **November 5**
\$50 per participant, at the door

*Make checks payable to The University of Akron

SEND REGISTRATION TO: Leigh Beisler
Office of Accessibility
The University of Akron
Akron, OH 44325-6213

CONTACT INFORMATION: Leigh Beisler at lab10@uakron.edu, (330) 972-7928
(Voice) or (330) 972-5764 (TDD)

RID CEUs: .3 credit or 3 clock hours, Professional Studies, Introductory Level

NOTES: Food and drinks will be provided. The workshop will be presented in ASL; a voice interpreter will not be available. Handouts will also be provided.

70 Seats Limited

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Registration Form

Name: _____

Address: _____

Phone: _____

Email: _____

Please make checks payable to The University of Akron.

Return this form to:

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