

Speaker Biographical Information

Instructions: for each speaker, complete a separate biography form.
If available, please attach resume.

Resume Form

Name and Degree:			
License type/number:			
Address:			
Telephone Number:			
Email Address:			
Present Position <i>(employer, title and description)</i>			
Degree	Institution (Name, City, State)	Major Area of Study	Year Degree Awarded
1.			
2.			
3.			
Residency	Institution (Name, City, State)	Major Area of Study	Year Degree Awarded
1.			
2.			

Use the space below to briefly describe your professional experience or areas of expertise (including publications) related to your involvement in continuing education and your particular role, e.g., speaker, presenter, content specialist.

Outstanding achievements/or other pertinent information about yourself. _____

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Additional Information

AUDIOVISUAL NEEDS

For cost considerations, please indicate below the A/V equipment that you actually plan to use. Flip charts, easels, LCD projectors, and laptops will be available upon request. We will attempt to supply other equipment as possible. Please note if you are planning an interactive session proposal that would require WIFI in your session room.

Flip Chart Laptop Computer Easel LCD Projector



SPECIAL ACCOMMODATIONS

The need for Special Accommodations will be respected. Please note what considerations you require: