

AASP Continuing Education Workshop Submission Cover Sheet

Instructions: Please TYPE the information requested below or reproduce on your computer and submit. After your cover sheet, please attach your completed workshop proposal following the guidelines presented in the Call for Proposals.

Workshop Title:

Presenters: Please attach an extra sheet if more than 2 presenters are involved.

1. Name: _____ Highest Degree: _____
Address : _____

Phone: _____ (Office) _____ (Home)
FAX: _____ E-Mail: _____

2. Name: _____ Highest Degree: _____
Address : _____

Phone: _____ (Office) _____ (Home)
FAX: _____ E-Mail: _____

Preferred Workshop Format: Please rank order your preferred workshop format.

Six Hour Workshops

___ Tuesday Night & Wednesday Morning
___ Wednesday Morning & Afternoon

Three Hour Workshops

___ Tuesday Night
___ Wednesday Morning
___ Wednesday Afternoon
___ Thursday Night

AV Requirements: Please check all the audio-visual equipment needed for your workshop.

Chalkboard/Flip Chart
(circle preference)

Overhead Projector
(including screen)

Slide Projector
(including screen)

VCR/TV

LCD
(including screen)

Special Requests: Please indicate any special concerns or requests (e.g., limit on number of participants, unique equipment or facility requests such as table arrangements, etc.)

Budget: Please itemize your budget including only handouts or other materials needed.

NOTE: Program acceptance decisions are not made on the basis of preferred workshop format, AV requirements, or special requests, but compromises in your requests may be necessary if your workshop is accepted.
