Presentation Proposal Form

Name of Presenter: _____

Title/Rank: _____ Institutional Affiliation: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____ E-mail: _____

Phone No.: _____ FAX No.: _____

Presentation: (Please Check [v] one)

[ ] Paper [ ] Panel [ ] Workshop

Title of Paper or Workshop: _____

Special Interest Group you are interested to join: (see list) _____

Names of Presenters: _____

A brief biography of lead presenter(s) and /or co-presenters. *Please use a separate Presentation Proposal Form for each lead presenter or co-presenter. Use additional paper if necessary.* _____

Brief description of the presentation. *(Abstract of 100 words or less). For a workshop, please add the workshop content, plan, and timetable.* _____