

SPECIAL TOPIC RESEARCH SYMPOSIUM/SESSION SUBMISSION FORM

CONTACT INFORMATION

Organizer/Chair Name: _____ Email: _____

Work Phone Number: _____ Cell Phone Number: _____

SUBMISSION INFORMATION

Symposium Title: _____

Co-Chairs (If applicable): _____

Submission Format (*Select all that apply*):

Oral Presentations Poster Presentations Panel Discussion

Other: _____

Session Length (*90 minute minimum*): _____ # of Presenters/Participants: _____

Requested Date/s: _____ Requested Time/s: _____

Audio/Visual Requirements (*Select all that apply*):

Podium/Mic PowerPoint Internet Transparency Projector Slide Projector DVD/VHS

Other: _____

Do you want to have your symposium judged for presentation awards?

(Must follow same format guidelines as general sessions = 20 minute oral presentations or a poster presentation.)

Yes No

Do you want us to secure a student volunteer to help manage the session on the day of the event?

(If no, the organizer/chair will be responsible for monitoring the participants' time during the session and interacting with the colloquium judges, if applicable)

Yes No

REQUIRED ATTACHMENTS

Symposium Abstract (250 – 500 words): Submit in separate word document for conference program

Symposium Agenda: Submit a complete list of your participating speakers and their individual titles in the order you wish them to present with the amount of time each will be presenting in a separate word document. *Sample agendas are attached to help with formatting and timing.*