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| TCSW Spring 2016Presenter Application | **April 4 – 6, 2016****Franklin Marriott** **Cool Springs** |

## Primary Presenter Information

|  |  |
| --- | --- |
| Name as you want it to appear in the conference program |  |
| Professional Title as you want it to appear in the program |  |
| Company or Organization |  |
| Street Address |  |
| City ST ZIP Code |  |
| Phone |  |
| E-Mail Address |  |

## Co-Presenter Information if Applicable

|  |  |
| --- | --- |
| Name as you want it to appear in the conference program |  |
| Professional Title as you want it to appear in the program |  |
| Company or Organization  |  |
| Street Address |  |
| City ST ZIP Code |  |
| Phone |  |
| E-Mail Address |  |

## Presentation Title.

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## Presentation Summary: Please describe the presentation in 70 words or less as you would have it printed in the conference program.

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## Availability

### Please mark the choices below to identify your availability. Please mark all that apply. We will do our best to match workshop schedules with availability, but a perfect match is not guaranteed.

|  |  |
| --- | --- |
| Monday Afternoon 1PM – 5PM | Tuesday Morning 8AM - Noon |
| Tuesday Afternoon 1PM – 5PM | Wednesday Morning 8AM - Noon |

## Presentation Style and Length (check only one):

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| --- | --- |
| Workshop (90 minutes) | Panel Discussion (90 Minutes)\* |
| Two 90 minute sessions (e.g. parts a & b) | \*Topic, panelists & facilitator arranged by presenter  |

## Audio/Video/Other equipment presenter will provide for presentation. TCSW relies on presenters to bring as much of your own equipment as possible. Mac users, you must bring your own laptop and provide your own projector adaptor.

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| Laptop |
| Projector |
| Speakers for video sound  |
| Other (List):  |

## Audio/Video/Other equipment TCSW is requested to provide.

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| --- |
| Laptop |
| Projector |
| Speakers for video sound  |
| Wireless Internet Access – specifically required for the presentation, not general access  |
| Other (List):  |

## Target Audience: Please specify the audience to whom your presentation is directed. If the level is a very important part of your presentation, please state that in your presentation summary, above.

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| Entry Level Worker | Workers with some experience |
| Workers with much experience | Supervisors |
| Anyone  | Administrators  |

## Notes and additional information.

Presenters are registered for the conference manually and do not need to register online. Primary presenters may attend the full conference including Tuesday’s luncheon at no cost. Co-Presenters attending other workshops or the luncheon must pay applicable registration fees. **Please indicate below if you plan to attend the full conference and/or the luncheon.** Please add any questions or comments below.

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| **Name of person submitting application**  |  |
| **Date** |  |

## Thank you for your interest in the TCSW Conference. Please complete and submit this form by email by December 15, 2015 to LaTamera Woodley, Latamera.Woodley@tn.gov. You will be contacted by email shortly after your application is received.