

**NASSGAP Fall Conference 2014**

**San Diego, CA**

**Presenter Information Form**

Speaker Name:

Speaker Title:

Mobile Phone Number:

E-Mail Address:

Brief Bio: (educational/career background)

*The above information may be included in a packet of speaker information for conference attendees*.

Session Title and Brief Session Description: (See tentative agenda for working title)

A/V Equipment Needs:

\_\_ I do not need any equipment.

\_\_ I need the following equipment: (check all that apply)

­­\_\_ Laptop

\_\_ LCD/Video Projector

\_\_ Microphone

\_\_ Other (itemize): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If not attending the entire conference, I will be joining you for:**

**Breakfast \_\_\_\_ or Lunch \_\_\_\_ on the day of my presentation.**

**Return to:**

Jennifer Rogers

Email: jrogers@mississippi.edu

Fax: 601-432-6527

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**NASSGAP use only**

Session Date:

Moderator: