



## 2016 Call for Speaker Form

P.O. Box 29007

Henrico, Virginia 23242

571-399-8660

viriniamediationnetwork@gmail.com

Last Name: \_\_\_\_\_ First Name \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Website: \_\_\_\_\_

### Session Information

Marketing Family Mediation

Divorce & Separation

Elder Mediation

Children & Parenting

Financial

Ethics & Standards

Session Title: \_\_\_\_\_

Session Description (75—100 words): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Biography of Presenter (75-100 words): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will you need AV Support? \_\_\_\_\_ Other supplies needed? \_\_\_\_\_

Speaker Proposals are being accepted until **March 31, 2016**. Full Presentations are required when submitting program proposal as these materials are needed for both the CME and CLE application process.

### Submission Checklist for Speakers:

1. Call For Speaker Form Completed.
2. ADR CME Application Completed & Signed.
3. Brief Bio of All Speakers Presenting.
4. Handouts, worksheets, role plays, power point presentations, etc. that will be included in presentation.

Please return all materials to Virginia Mediation Network at [viriniamediationnetwork@gmail.com](mailto:viriniamediationnetwork@gmail.com) or mail to: VMN, P.O. Box 29007, Henrico, Virginia 23242.