



## 2018 Call for Speaker Checklist Form

P.O. Box 29007

Henrico, Virginia 23242

804-316-5271

[viriniamediationnetwork@gmail.com](mailto:viriniamediationnetwork@gmail.com)

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

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

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

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

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

### Required Documentation for Workshop Submission:

- Session Title: \_\_\_\_\_
- Session Description (One paragraph, 3-5 sentences to be included in program marketing materials)
- Biography of Presenter(s) (One paragraph, 3-5 sentences to be included in program marketing materials)
- ADR CME Application (Completed & signed can be emailed to [viriniamediationnetwork@gmail.com](mailto:viriniamediationnetwork@gmail.com) or mailed to address listed below.)
- Handouts, worksheets, role plays, power point presentations, etc. that will be included in presentation.
- Will you need AV Support? \_\_\_\_\_
- Other supplies needed? \_\_\_\_\_

Speaker Proposals are being accepted until **March 31, 2018**. Full Presentations are required when submitting program proposal as these materials are needed for both the CME and CLE application process. Please return all materials to Virginia Mediation Network at :

[viriniamediationnetwork@gmail.com](mailto:viriniamediationnetwork@gmail.com)

or mail documents to:

VMN

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