



**STN CONVENTION 2019 – SPEAKER PROPOSAL**

Please submit a separate form for each session and return to [info@studenttelevision.com](mailto:info@studenttelevision.com)

NAME:

CO-PRESENTER(S) and ASSISTANT(S):

AFFILIATION:

CELL PHONE:

OFFICE PHONE:

ADDRESS:

CITY:

STATE:

ZIP:

EMAIL:

SESSION TITLE:

AUDIENCE: \_\_\_\_ Teachers \_\_\_\_ Students \_\_\_\_ Teachers and Students

**BIO - 50 WORDS OR LESS:**

**SESSION DESCRIPTION - 50 WORDS OR LESS:**

**STN WILL SUPPLY A PROJECTOR AND SCREEN FOR YOUR PRESENTATION. THERE IS NO INTERNET IN THE SPEAKER ROOMS SO PLEASE BRING YOUR MATERIALS ON YOUR LAPTOP OR FLASH DRIVE.**

**LIST PERIPHERALS AND EQUIPMENT YOU ARE PROVIDING, PLEASE BE SPECIFIC:**

**SCHEDULE PREFERENCE: Please pick your 1<sup>st</sup> and 2<sup>nd</sup> choice.**

Fri 3/28

Sat 3/29

9:00am-10:30am \_\_\_\_

9:00am-10:30am \_\_\_\_

10:45am-12:15pm \_\_\_\_

10:45am-12:15pm \_\_\_\_

1:15pm-2:45pm \_\_\_\_

1:15pm-2:45pm \_\_\_\_

3:00pm-4:30pm \_\_\_\_

ARRIVAL DATE AND TIME:

DEPARTURE DATE AND TIME: