

2023 Eastern Midwestern Peer to Peer WIOA 166/PL 102-477 Training
 The Westin (formerly Renaissance) Washington DC Downtown Hotel
 999 9th St NW, Washington DC, 20001
 December 4th though December 7th

WORKSHOP PRESENTATION PROPOSAL

Workshop Presentation Information		
Workshop Title:		
Workshop Description:		
Length of Workshop Session: <input type="checkbox"/> 1 ¼ hours <input type="checkbox"/> 2 ¼ hours	Registration Waived for Primary Presenter Only (must present twice).	
Are you willing to repeat session: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Preferred Date(s): Monday Tuesday Wednesday		
Primary Presenter's Name:	Title/Position:	
Grantee/Company/Agency:		
Mailing Address:		
City:	State:	Zip Code:
Email Address:	Daytime Phone:	Fax No.:
Additional Presenter's Name:	Title/Company:	
Additional Presenter's Name:	Title/Company:	
Additional Presenter's Name:	Title/Company:	
Presenter Agreement: I hereby affirm that none of the material presented in my presentation, to my knowledge, infringes upon the copyright or right of privacy of others, and that material which references work of others will be properly credited to that source. Further, I will not misrepresent, libel or slander, any other person, facility, service or product during the course of my presentation. If such affirmation is breached, I will indemnify and hold harmless FGCI, Inc. and the Hotel from and against any actions, losses, costs, damages, claims, and expenses including attorney's fees.		
_____ Presenter's Signature		_____ Date

<u>Audio-Visual/Training Needs</u>	<u>Preferred Room Set-Up</u>	<u>Handouts/Printed Material</u>
<input type="checkbox"/> Microphone <input type="checkbox"/> Flipchart <input type="checkbox"/> Laptop <input type="checkbox"/> Table <input type="checkbox"/> LCD Projector <input type="checkbox"/> Screen <input type="checkbox"/> DVD Player <input type="checkbox"/> Bringing <input type="checkbox"/> VCR <input type="checkbox"/> Own Equip ***Please bring your own equipment if possible. Thank you.	<input type="checkbox"/> Classroom <input type="checkbox"/> Theatre <input type="checkbox"/> Rounds <input type="checkbox"/> U-Shape Table <input type="checkbox"/> U-Shape No Table <input type="checkbox"/> Other _____	Presenter <input type="checkbox"/> will <input type="checkbox"/> will not have handouts. <input type="checkbox"/> Available in electronic format <input type="checkbox"/> Available in hard copy only <input type="checkbox"/> Need handouts reproduced (provide handout to be reproduced by email to katkins@fgcia.org)

Please email to: katkins@fgcia.org AND cc: dwaldron@rhodeislandindiancouncil.org
 ➤ Recommended submitted by date*****November 15, 2023*****