

2) Name (include title): _____
Institution /Organization: _____
Address: _____
Daytime or Cell Phone: _____
Email: _____

3) Name (include title): _____
Institution /Organization: _____
Address: _____
Daytime or Cell Phone: _____
Email: _____

9. Preferred Day (Thursday sessions are 75 minutes and Friday sessions are 50 minutes)

_____ Thursday, September 27

_____ Friday, September 28

10. Length of Presentation: Sessions will be 75 minutes on Thursday and 50 minutes on Friday. Individual presenters requiring less time will be combined with others with similar topics. Fifteen minutes for Questions and Answers and discussion will be allotted at the end of each session.

_____ 15-20 mins. _____ 25-30 mins. _____ 60 mins _____ flexible

11. Biosketch of presenter(s): (for introductions and networking purposes, if accepted, this will be listed in the Conference program)

12. Audio/Visual Equipment Needs: please circle all equipment needed: laptop, projector, DVD player, other? ADA Needs?: _____

Email your completed form **by April 15, 2018** to: LatComsConf@wcupa.edu, or mceballos@wcupa.edu.
