

# 2019 Region IV Presenter Request



**Presenting Company/  
Individual**

**First Name:**

**Last Name:**

**Email:**

**Phone Number:**

**Please submit a biography for the speaker.**

## Session Details

**Title of Session:**

**Description of Session**

### **Session Objectives**

3-5 specific objectives that describe what participants will learn or gain from the session:



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## Audio Visual Needs:

AVAILABLE SUPPLIES:

Internet

Computer

Projector

Microphone

Computer Connections

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**Additional Information or  
comments**

**Please remit this completed form to Dazsa Carter, [dcarter@okacte.org](mailto:dcarter@okacte.org) by January 15, 2019.**

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