

**NAWIC Professional Development & Education  
Program / Activity Suggestions**

Submitter's Name   
Region/Chapter

Preferred Contact Information

Email   
Cell  Office

Preferrable Contact Time(s):   
*(For Planning Call)*

Program / Activity Title

Purpose of Program/Activity

Presentation Style (speaker, interactive, workshop, etc)

Have you presented or participated in this topic previously?

Expected/Desired Outcomes of this program/activity?

Are there any special requirements for this presentation (i.e. tech, supplies, seating, accomodations, etc.)? If so, please describe.

Expected time needed for program/activity?