

“EXTREME PASSION-EXTREME PRACTICE-EXTREME PERFORMANCE”

Conference 2010 Workshop Proposal

March 3, 2010

The Marriott Griffin Gate, Lexington, Kentucky

***This Proposal Application is for Three or Six Hour Workshops Only.**

*Program Title: _____

Numbers of Hours of Workshop: ___ 3 EILA Hours ___ 6 EILA Hours

Kentucky Dept. of Education Approval Number (required): _____

Program Description:

_____ (Use Back)

Audience: (Circle all that apply.)

K-5 6-8 9-12 Post-Secondary or ALL Levels

Seating Style Preferred for Audience (Circle One): Theater Classroom

Names of Presenter(s): _____

Presenter's Vita: _____

_____ (Use Back)

Name of Contact Person: _____

Phone Number: _____ E-Mail Address _____

For each 6 hour presentation given, an honorarium of \$500.00 will be paid

For each 3 hour presentation given, an honorarium of \$250.00 will be paid

Presenter(s) will be responsible for any equipment needed-including handouts- for presentation unless written requests are submitted with this form and approved by KSCA.

For more information, contact CAROL LEWIS at one of the addresses below:

Attach to this proposal a copy of your agenda and send proposal(s) to:

E-mail: Carol.Lewis@insightbb.com
Carol Lewis KSCA Conference Planner
3853 Barnard Drive
Lexington, KY 40509

THE DEADLINE FOR SUBMISSION OF PROPOSAL IS **December 1, 2009**
