Proposal to Present Form	Fifth Anr	ual College- and Career-Rea	adiness Standards Networking Conference Nashville, Tennessee — July 10-12, 2017				
Deadline: March 31, 2017							
Receipt of your proposal to present will be confirmed via email. If your proposal is approved, you will be notified by May 15, 2017. Accepted presenters must register and pay the full registration fee. This form cannot be used to register for the conference. If you have questions, call (404) 962-9629 or email summerstaffdev@sreb.org.							
Ways to submit:							
 Online: www.sreb.org/networkingconference Email: summerstaffdev@sreb.org By fax: (404) 872-1477 By mail: Southern Regional Education Board Attn: Networking Conference 592 10th St. N.W. Atlanta, GA 30318-5776 							
Who is the target Will your session foc	us A	udiovisual Requirements*	Session Layout**				
audience? on LDC, MDC or both		-	Theater Seating				
Participants new to		Flip chart and markers	Roundtable/Classroom				
 Participants who have experience with LDC/ MDC Both 							
*Items must be requested at least 60 days prior to the con your own projector and laptop. In the event you are una own expense through Tech Rentals — (800) 967-2419. **We will do our best to accommodate session layout prefer needs of attendees.	able to provide	your own and need AV equi	pment on-site, you may obtain it at your				
Conference Objective You may ch	noose only one	objective per session. (Exar	nple: 1)				
Session Length:							
□ 60-minute session □ 120-minute session □	Mini-sharing	g session (two 30-minute se	ssions)				
Are you willing to repeat this session?	No						
1. Presenter's Name							
School or Organization							
How long have you been using LDC/MDC?							
Less than a year 1 year 2 years	∐ 3 yea	rs or more					
How many MDC FALs have you implemented?	🔲 Not ap	oplicable					
How many LDC modules have you implemented							
□ 1-2 □ 3-4 □ 5-6 □ 7 or more		oplicable					
Mailing Address							
Job Title		Content Area (if appl	icable)				

Personal Email			_ Daytime Phone Number	()
Have you presented before? (Check one)	🔲 Yes	No No			

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Proposal to Present Form (continued)

Session Abstract (up to 220 characters with spaces):

2.	Presenter's Name	
	School or Organization	
	How long have you been using LDC/MDC?	□ 3 years or more
	How many MDC FALs have you implemented?	□ Not applicable
	How many LDC modules have you implemented?	□ Not applicable
	Mailing Address	
	Job Title	Content Area (if applicable)
	Personal Email	Daytime Phone Number ()
	Have you presented before? (Check one)	□ No
3.	Presenter's Name	
	School or Organization	
	How long have you been using LDC/MDC?	□ 3 years or more
	How many MDC FALs have you implemented?	Not applicable
	How many LDC modules have you implemented?	Not applicable
	Mailing Address	
	Job Title	Content Area (if applicable)
	Personal Email	Daytime Phone Number ()
	Have you presented before? (Check one)	□ No
The bef	oposal Information: e session title and abstract may be edited before it is print ore submitting. ssion Title (up to 220 characters with spaces):	ed in the conference program. Please write concisely and proofread thoroughly
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Further Description (up to 220 characters with spaces): — Please provide any additional information that will help us understand your session. Include any data you've used to identify problems and solutions, changes you've made, and how they affected student achievement. This information may appear in the conference program.

Evidence (up to 220 characters with spaces): - Please show evidence that what you have done has produced positive results.