

PROPOSAL SUBMISSION FORM

TO BE COMPLETED BY FACULTY PRESENTER AND RETURNED TO FACULTY/PROGRAM DIRECTOR

NAME OF THE ORGANIZATION PRESENTING THE EDUCATIONAL ACTIVITY

NAME OF EVENT

DATE OF EVENT _____ *LOCATION OF EVENT* _____

1. PROPOSED TITLE OF PRESENTATION:

2. PROPOSED LENGTH:

HOURS: _____ *MINUTES:* _____

3. PROPOSED INSTRUCTIONAL METHODS:

- Demonstration/ Hands-on Workshop
- Case Studies
- Panel Discussion
- Worksite Visit
- Small Group Discussion
- Other _____

4. PROPOSED LEARNER-CENTERED, BEHAVIORAL EDUCATIONAL OBJECTIVES:

The educational objectives should be stated to reflect the anticipated abilities of the learner as a result of the educational activity. Do not state the teaching plan. Objectives should complete the following statement.

“Upon completion of this educational activity, the learner should be able to:”

- **Use action verbs!** describe ...explain...apply...cite...differentiate...use...identify...

5. ALL FACULTY ARE REQUIRED TO:

- prepare individual learning objectives for their particular topic
- prepare a syllabus that includes a copy of their slides/electronic presentation and a bibliography for inclusion in a published syllabus for all attendees
- communicate regularly with the activity's program director
- offer a presentation free of commercial bias
- disclose commercial interests

Faculty Name (as it will appear in publication)

Biographical Sketch provided

Professional Title: _____

Company: _____

Street Address: _____

City, State, Zip: _____

Telephone: _____ Fax: _____

E-mail: _____

[Return to:](#)
