

ARUCC 2010 Session Proposal Form

Presenter Information	
Name:	Title:
Institution:	
Telephone:	Email:
Name:	Title:
Institution:	
Telephone:	Email:
Session Information	
Session Title:	
Session Type (presentation, panel, discussion):	
Presentation length: <input type="checkbox"/> 60 minutes <input type="checkbox"/> 75 minutes	
Presentation Language: <input type="checkbox"/> English <input type="checkbox"/> Francais	
Target Audience (ie: front line staff, admissions officers, managers, senior managers, etc):	
Audio/Visual Needs	
<i>*Laptops will not be furnished for presentation</i>	
<input type="checkbox"/> Computer Projector <input type="checkbox"/> Overhead Projector <input type="checkbox"/> Microphone	<input type="checkbox"/> Flip Chart <input type="checkbox"/> Internet Connection <input type="checkbox"/> Other _____
<input type="checkbox"/> VHS/Monitor <input type="checkbox"/> Audio speakers	

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Session Description

Short Description (50 words max):

Long Description (150 words max - Abstract placed in program):

Other Comments

Return this form
by email or fax to:

Mark Johnston and/or Rella Ng
Enrolment Services
University of British Columbia
Vancouver, BC

Arucc2010@arucc.ca

Fax: (604)822-5945