

Session #: _____

Session # (If repeated): _____

LITERACY ACROSS THE LIFESPAN

March 8, 2005, Kellogg Center, East Lansing, MI

RETURN BY NOVEMBER 12, 2004**PRESENTATION INFORMATION**

Presentation Title _____

Presentation Abstract (up to 40 words)

Provide a description that accurately explains your workshop topic, content and format (discussion, presentation, interactive, etc.). Participants will make their selections based on this information.

Please indicate the track, type, and format which best describes your presentation:

Tracks (Select One)	Type (Select One)	Format (Select One)
<input type="checkbox"/> Emergent Literacy (Literacy Development Among Young Children)	<input type="checkbox"/> Effective Programs	<input type="checkbox"/> Session (75 minutes)
<input type="checkbox"/> Literacy Development Among Schoolage Children	<input type="checkbox"/> Addressing, Need, Impact, and Research	<input type="checkbox"/> Poster
<input type="checkbox"/> Adult Literacy	<input type="checkbox"/> Public Policy and Advocacy	<input type="checkbox"/> Exhibit (free for nonprofits \$50 fee to for-profits organizations)
<input type="checkbox"/> Family Literacy	<input type="checkbox"/> Building Community Capacity	
➔ Are you willing to repeat this workshop? (Check one) Yes <input type="checkbox"/> No <input type="checkbox"/>		

AUDIO VISUAL/PRESENTATION EQUIPMENT.

The conference will provide microphones where warranted. Please request only what is essential for an effective presentation. We are, unfortunately, unable to provide computers or LCD projectors.

 Standard Overhead Slide projector Chart paper Screen # of tables for display/materials Other equipment may be available - This may be negotiated with the AV Coordinator if your proposal is selected.**PRESENTERS (Names, titles, and addresses of additional presenters may be listed on the reverse side)**

Presenter Name _____ Title/Position _____

Agency _____

Telephone () _____ Fax: () _____ E-mail: _____

Mailing address _____

City _____ State _____ Zip _____

Please return your workshop application by email to talbotp@msue.msu.edu or by fax to Pat Talbot (517) 355-6748.**WORKSHOP APPLICATION DEADLINE: November 12, 2004**