

# WORKSHOP AGENDA

2009 NORTH AMERICAN CF CONFERENCE

(Please submit ALL information requested below no later than June 30, 2009)

**TITLE OF SESSION:** \_\_\_\_\_

**MODERATOR(S):** \_\_\_\_\_

**Who will do the introduction?** \_\_\_\_\_

**Time introduction will begin:** \_\_\_\_\_

**Length of introduction (# of minutes):** \_\_\_\_\_

**(NOTE: An introduction/overview of the session is mandatory.)**

**PRESENTATION #1** - Please check one: \_\_\_\_\_ abstract \_\_\_\_\_ invited

**Abstract #, if applicable:** \_\_\_\_\_

**Time presentation will begin:** \_\_\_\_\_

**Length of presentation (not including discussion):** \_\_\_\_\_

**Title of presentation:** \_\_\_\_\_

**Speaker's name:** \_\_\_\_\_ **Degree:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Telephone:** (\_\_\_\_) \_\_\_\_\_ **Fax:** (\_\_\_\_) \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Discussion Time (# of minutes):** \_\_\_\_\_

**PRESENTATION #2** - Please check one: \_\_\_\_\_ abstract \_\_\_\_\_ invited

Abstract #, if applicable: \_\_\_\_\_

Time presentation will begin: \_\_\_\_\_

Length of presentation (not including discussion): \_\_\_\_\_

Title of presentation: \_\_\_\_\_

Speaker's name: \_\_\_\_\_ Degree: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Discussion Time (# of minutes): \_\_\_\_\_

**PRESENTATION #3** - Please check one: \_\_\_\_\_ abstract \_\_\_\_\_ invited

Abstract #, if applicable: \_\_\_\_\_

Time presentation will begin: \_\_\_\_\_

Length of presentation (not including discussion): \_\_\_\_\_

Title of presentation: \_\_\_\_\_

Speaker's name: \_\_\_\_\_ Degree: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Discussion Time (# of minutes): \_\_\_\_\_

**PRESENTATION #4** - Please check one: \_\_\_\_\_ abstract \_\_\_\_\_ invited

Abstract #, if applicable: \_\_\_\_\_

Time presentation will begin: \_\_\_\_\_

Length of presentation (**not** including discussion): \_\_\_\_\_

Title of presentation: \_\_\_\_\_

Speaker's name: \_\_\_\_\_ Degree: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Discussion Time (# of minutes): \_\_\_\_\_

**PRESENTATION #5** - Please check one: \_\_\_\_\_ abstract \_\_\_\_\_ invited

Abstract #, if applicable: \_\_\_\_\_

Time presentation will begin: \_\_\_\_\_

Length of presentation (**not** including discussion): \_\_\_\_\_

Title of presentation: \_\_\_\_\_

Speaker's name: \_\_\_\_\_ Degree: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Discussion Time (# of minutes): \_\_\_\_\_

**PRESENTATION #6** - Please check one: \_\_\_\_\_ abstract \_\_\_\_\_ invited

Abstract #, if applicable: \_\_\_\_\_

Time presentation will begin: \_\_\_\_\_

Length of presentation (not including discussion): \_\_\_\_\_

Title of presentation: \_\_\_\_\_

Speaker's name: \_\_\_\_\_ Degree: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Discussion Time (# of minutes): \_\_\_\_\_

**END OF SESSION DISCUSSION AND WRAP-UP (Mandatory):**

Beginning time: \_\_\_\_\_

Length (# of minutes): \_\_\_\_\_

Who will do the wrap up? \_\_\_\_\_

**NOTE: Please see next page for submission of Educational Objectives.**

**EDUCATIONAL OBJECTIVES:**

**At the conclusion of this session, participants should be able to:**

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_