



PRESENTER PROPOSAL 2015 ND Governor's Workforce & HR Conference

Please complete the attached proposal form and email it to ndhrcouncil@gmail.com or mail it to: NDSHRM, PO Box 7267, Fargo, ND 58106-7267.

Presentation Title: _____

Presentation Length: _____

Presenter Name: _____

Position Title: _____

Company: _____

Mailing Address: _____

E-mail Address: _____

Website: _____

Check available date(s):

Wednesday, September 16, 2015

Morning

Afternoon

Thursday, September 17, 2015

Morning

Afternoon

Short Description of Presentation:

North Dakota SHRM State Council

Affiliate of Society for Human Resource Management



Please list the top four learning objectives or outcomes of the presentation:

1. _____
2. _____
3. _____
4. _____

Has this presentation been previously certified for credit through the Human Resource Certification Institute? If so, provide date, location and program number.

Yes No

Date: _____ **Location:** _____ **Program Number:** _____

Provide two professional references and contact information, preferably groups presented to.

1. _____
2. _____

Provide a concise, one-paragraph biography, 50 words or less.

North Dakota SHRM State Council

Affiliate of Society for Human Resource Management



Audio/visual/room requirements:

- Computer Projector Audio Handheld Microphone Lapel Microphone
 Podium Flip Chart Other: _____

Speaking Fee: _____

Anticipated travel/related costs:

Other Comments:

SPEAKER AGREEMENT

In submitting this proposal and signing below, I certify that I am available for the date(s) designated above. If selected, I agree to adhere to the conduct expected of presenters at this event including meeting all stated deadlines prior to and during the event, appearing during my scheduled session presentation time(s), and maintaining a professional demeanor at all times while at this event.

I understand that my presentation is not a showcase for promotion of my business, practice or product, and I will not sell my products or services from the speaker platform. Any misrepresentation of my skills and knowledge will be grounds for my release or disqualification from this selection process.

Signature: _____

Date: _____



The North Dakota SHRM State Council supports the human resources profession across North Dakota by providing leadership, connections, development opportunities and resources.