



# CALL FOR PRESENTERS

ACTE Region IV Conference • Beau Rivage • Biloxi, MS

---

---

*Instructions:* **Please submit the following.**

School or Company Name \_\_\_\_\_

Presenter \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Please submit a title and a 50-word description for your presentation in a Word format document. Indicate audio/visual equipment requirements. Your presentation should be 30-45 minutes.

---

---

---

---

---

---

---

---

---

---

Please indicate which group(s) your proposal is targeting:

- |  |   |
|--|---|
| <input type="checkbox"/> Administration            | <input type="checkbox"/> Marketing Education    |
| <input type="checkbox"/> Agricultural Education    | <input type="checkbox"/> New & Related Services |
| <input type="checkbox"/> Business Education        | <input type="checkbox"/> Special Needs          |
| <input type="checkbox"/> Employment & Training     | <input type="checkbox"/> Technical Education    |
| <input type="checkbox"/> Family & Consumer Science | <input type="checkbox"/> Tech Prep              |
| <input type="checkbox"/> Guidance                  | <input type="checkbox"/> Trade & Industrial     |
| <input type="checkbox"/> Health Occupations        | <input type="checkbox"/> Other (list) _____     |

Return to: Suzanne Kelly, MS ACTE Executive Director  
P.O. Box 1124  
Purvis, MS 39475  
mississippiacte@gmail.com