

# Presenter's Application Form

The 42nd Annual MAMSE Conference • "Great To Be Middle"  
Thursday, March 22 & Friday, March 23, 2012 • Warren Woods Middle School



The Michigan Association of Middle School Educators (MAMSE) invites you to submit a proposal to present at the 2012 conference hosted by Warren Woods Middle School. Your participation is appreciated and will assist us in making this conference both memorable and meaningful. Completed applications must be postmarked by **December 21, 2011**. A conference Registration form is required for all presenters. Only the Lead Presenter (1 person) will receive a reduced conference rate of **\$20.00** if they are a MAMSE member (\$50.00 if they are a non-member). This rate includes lunches.

A presentation confirmation will be emailed to each main presenter when the sessions have been scheduled.

## Lead Presenter Information: *(Please type or print)*

Please check this box if you are interested in being part of the MAMSE email network.

Name: \_\_\_\_\_ County: \_\_\_\_\_

School/Organization: \_\_\_\_\_ School District: \_\_\_\_\_

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

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

Email Address: *(For your confirmation e-mail)* \_\_\_\_\_

Work Phone: \_\_\_\_\_

## Presentation Information: *(Please type or print)*

Title: \_\_\_\_\_

Abstract: In seventy-five (75) words or less, give a summary of the content of your session as you would like it to appear in the program. Please include major emphasis, objectives, activities and how it relates to middle school level education. It would help us greatly if you can type this in MS Word and send the file to [mamseoffice@mamse.org](mailto:mamseoffice@mamse.org). If this is not possible, please type (or print) and attach to this form.

## Name and E-mail Address of Additional Presenters:

*(additional presenters will be charged the discount group rate)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Deadline: December 21, 2011

### Presentation Specifics:

#### Presentation length:

60 minutes  90 minutes\* *(\*limited slots available)*

#### Would you repeat your presentation?

Yes  No

#### Preferred day of presentation:

No preference  
 Thursday, March 22  Friday, March 23

#### Would you be willing to monitor SB-CEUs for your session? Yes No

**Technology needs:** *(AV/Tech needs must be requested now. We can only attempt to meet requests indicated here. You may need to furnish some yourself):*

Digital Projector,  Screen,  PC,  Television,  
 VCR,  DVD Player,  Overhead Projector,  
 Other (please specify): \_\_\_\_\_

Mail completed applications to: MAMSE  
1390 Eisenhower Place, Ann Arbor, MI 48108,  
Phone: 734-677-5678, Fax: 734-677-2407,  
[mamseoffice@mamse.org](mailto:mamseoffice@mamse.org)