**To submit a proposal to be considered as a speaker for one of our programs, please complete this form and return it to** [**info@chesapeakeplannedgiving.org**](mailto:info@chesapeakeplannedgiving.org)**.**

**SPEAKER INFORMATION**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Speaker |  | | | | | | |
| Job Title |  | | | | | | |
| Company |  | | | | | | |
| Address |  | | | | Suite | |  |
| City |  | State |  | Zip | |  | |
| Phone |  | Cell |  | | | | |
| Email |  | | | | | | |

**Optional:**

|  |  |  |  |
| --- | --- | --- | --- |
| Academic Credentials |  | Professional License/Certification |  |

**ADDITIONAL SPEAKER INFORMATION**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Co-Speaker |  | | | | | | |
| Job Title |  | | | | | | |
| Company |  | | | | | | |
| Address |  | | | | Suite | |  |
| City |  | State |  | Zip | |  | |
| Phone |  | Cell |  | | | | |
| Email |  | | | | | | |

**Optional:**

|  |  |  |  |
| --- | --- | --- | --- |
| Academic Credentials |  | Professional License/Certification |  |

**SPEAKER CONTACT *(other than speaker - if applicable)***

|  |  |  |  |
| --- | --- | --- | --- |
| Contact |  | | |
| Phone |  | Email |  | |

Professional biographical sketch for primary presenter that will be included in promotional and printed materials **(limited to 150 words).**

Presentation Title:

Include three specific continuing education learning objectives for this presentation. **By attending this session, participants will learn:**

Learning Objective #1:

Learning Objective #2:

Learning Objective #3:

Presentation Abstract, including presentation content, description, and how it will benefit our members **(limited to 150 words)**.

Presentations held at monthly meetings and the Planned Giving Symposium will be an hour long. Please include the intended length of presentation.

|  |  |
| --- | --- |
| **Length of Presentation** |  |

**Select the Educational Track that Best Fits your Presentation:**

**Fundamentals** – *Introduction of planned giving fundamentals for professionals with 0-2 years of experience*

**Donor Relations** – *Best practices in planned giving prospect identification, cultivation, solicitation and stewardship*

**Communications and Marketing** – *From tried and true to cutting edge, ideas that work for every size organization*

**Advanced** – *Challenging the status quo with fresh ideas and technical concepts for seasoned professionals with 5-10 (or more) years of experience*

**FEES & REIMBURSEMENT**

The fee for this presentation is:

 $

**Note:** If approved, the Chesapeake Planned Giving Council will submit a Speaker Agreement for signature which will contain the Terms associated with the speaking arrangement.

**Presenter Eligibility**

|  |
| --- |
| *Two references or evaluations from previous speaking engagements must be included with your submission* |
| *Please list four previous speaking engagements, the year of the presentation and the number of individuals in the audience.* |