



**Annual Meeting and Conference
NOVEMBER 19-21, 2014
NASHVILLE, TN**

.....
Preliminary Session Outline

Session Title: _____

Short Description of Session: _____

Presenter 1 Name/Title: _____

Institution: _____

Email/Phone: _____

Presenter 2 Name/ Title: _____

Institution: _____

Email/Phone: _____

Presenter 3 Name/Title: _____

Institution: _____

Email/Phone: _____

Specific Equipment Needs: _____

Chair/Recorder Name: _____

Title: _____

Institution: _____

*Please return completed form by **Monday, September 15, 2014** to: Dusty Duncan, President-Elect*

Email: duncandj@etsu.edu

Fax: 423-439-4560

Mail:

East Tennessee State University

Attn: Dusty Duncan

Box 70731

Johnson City, TN 37614-1707

