Studio Central

Session Presenter Application

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| *Please provide a name and a brief description of an introductory level session or workshop you are willing / able to present.* |
| *What is your level of comfort in conducting a session on your topic?*  *Much experience and confidence*  *Some experience with desire to learn more*   *Little of no experience with a desire to learn*  **All participants are required to participate in a presentation seminar(s) prior to workshop delivery.** |
| *List the resources you will require to conduct your session.* *Special Furniture:**Materials:**Tools:**Audio Visual:**Handouts, Props, Models:**Volunteer Assistance:**Other:* |
| *Session promotion: Indicate how you plan to promote your session.*  *Announcement on monthly schedule*  *Word of mouth to friends, alumni, and others you know*  *Follow up with participants at Open Studio* *Other: (Please elaborate)* |

**NOTE: Volunteers presenting off-site may be required to present a Child Abuse Registry Check and Criminal Record Certificate**