

Proposal Number _____ Date Received _____ NAME _____

PENNSYLVANIA SCIENCE TEACHERS CONVENTION

Hershey Lodge and Convention Center, Hershey, PA

November 30-December 2, 2011

Program Proposal Form

Title of Presentation:

Presentation Abstract: Up to a 40 word description as it will appear in the program booklet. Please write legibly.

Exhibitors are asked to complete an Exhibitor Proposal Form

******All Presenters Must Pay Registration Fees******

Presenter Information:

Name and address of main presenter

NAME _____

SCHOOL _____

Home Address _____

Work Address _____

City, State, ZIP _____

City, State, ZIP _____

Home Phone _____

School Phone _____

Email _____

Fax: _____

Name, affiliation and city of all presenters as they are to appear in the program. (NOTE: We do not have room for job titles, department names, etc., unless it is in lieu of an institution., e.g. Independent Consultant.)

1. _____
2. _____
3. _____

Select ONE for each category.

Type of Presentation:

_____ Lecture

_____ Demonstration

_____ Panel/Discussion

_____ Hands-On

Grade Level

_____ K-4

_____ 5-8

_____ 9-10

_____ 11-12

_____ College

_____ Other

Subject Area

_____ Biology

_____ Chemistry

_____ Physics

_____ Earth Science

_____ Physical Science

_____ STS

_____ Environmental

_____ Safety

_____ Research

_____ Inquiry

_____ Pedagogy

_____ Other

Audio Visual Equipment

PSTA will provide a screen in each room. Transparency projectors will be provided upon request. PSTA will NOT provide and LCD projectors; projects that connect via a computer interface, or internet access.

Presenters are responsible for all other equipment at their own expense. Presenters may bring their own equipment for use at the Hershey Lodge and Convention Center

Preferred Time Allocation: (Please indicate either a morning or afternoon preference.
Provide any notes necessary.)

_____ Morning Session

_____ Afternoon Session

Preferred Day:

_____ Thursday

_____ Friday

_____ No Preference

All rooms are set up in classroom style including tables and chairs.

Special Circumstances:

_____ Need more than **15 minutes** setup time

_____ Other, Explain _____

Other notes to Program Staff: _____

Safety Information: (Attach a separate sheet if necessary.)

1. Identify any potential safety hazards associated with your presentation.
2. What precautions will be taken during the presentation to deal with the hazards and to inform the audience of these hazards?
3. What safety equipment will be required? Please indicate provider.

Please send **TWO** copies of the completed proposal form to:

Dr. Christine Royce

PSTA Program

PO Box 305

Newburg, PA 17240

717-477-1681 (W)

717-477-4046 (Fax)

CARoyce@aol.com

Deadline: Proposals must be received on or before May 30 to procure room arrangements and AV needs. Confirmations will be sent by late summer. Late proposals cannot be given special consideration as to time preference.