



Application to Present a Program for CPE Credit

Chapter Meeting

SAVE this form to your desktop first. Then open it, fill it in, save it and you'll be able to send it by email. Please fill this application out completely. You will be notified when your session is approved or if more information is needed. Submit completed applications to Lisa Yates, Lisa_Yates_DKG@outlook.com, PPE Chairperson.

Chapter:

Person Completing Form:

Today's Date:

Your Email Address:

Chapter President:

Chapter President's Phone Number:

Chapter President's Email:

Title of Session:

Brief Description of Session: (300 words or less)

Length of Presentation:

Number of CPE Hours Requested:

Name of Presenter: (use the name of the primary presenter responsible for contacting all other presenters)

Chapter if applicable:

Presenter's Email:

Phone:

Presenter's Credentials:

Name of Second Presenter:

Chapter if applicable:

Second Presenter's Email:

Second Presenter's Credentials:

Name of a member from your presenting chapter who would facilitate your session. (Collect sign-in sheets & introduce)

Technology Required: **Yes** **No**

If "Yes" what type of technology:

FOR PPE COMMITTEE USE ONLY

Texas State Organization President's Signature: _____

Date: _____