



## **Presentation Proposal**

**2017 MAND Annual Meeting**

*Friday, May 12, 2017*

Maritime Institute

692 Maritime Boulevard

Linthicum Heights, MD 21090

### **Part I: Speaker Information**

**Speaker name:** \_\_\_\_\_

**Credentials/Degrees:** \_\_\_\_\_

- Academy of Nutrition and Dietetics Member  
 Non-member

**AND Membership Status:** If applicable, please provide membership #: \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Title/Position:** \_\_\_\_\_

**Preferred Email:** \_\_\_\_\_

**Preferred Phone Number:** \_\_\_\_\_

**Preferred Phone Number is:**  Mobile Phone  Work  Home

**Preferred Mailing Address:** \_\_\_\_\_

**Preferred Mailing Address is:**  Home Address  Work Address  Other



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**Please provide a curriculum vitae\* or resume\* and biographical sketch (500 words or less) for the proposed speaker. Highlight recent career accomplishments, publications, research, work experience and presentations. Be sure to include the experience qualifying the speaker to present on the proposed topic.**

*\*Please email these documents separately to the Council on Professional Issues Chair - Caitlin Krekel, MSPH RD LDN at [ckrekel1@jhmi.edu](mailto:ckrekel1@jhmi.edu)*

**If not included in the information above, please list all undergraduate and/or graduate degree(s), institution, and location below.**

## **Part II: Presentation Proposal**

**Presentation Description. Provide a brief (500 words or less) explanation of the content of your session, session format, and rationale for presentation at the MAND Annual meeting.**



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**Please provide 1 -2 Learning Need Codes (LNC) for the proposed presentation** (*if you are not familiar with LNC you may leave blank*):

A list of General Learning Need Codes is included in the following document:

<https://www.cdrnet.org/vault/2459/web/files/Step2PDP.pdf>

- 1.
- 2.

**1. Learning Level of proposed presentation** (*if you are not familiar with learning levels you may leave blank*):

- A. Level 2
- B. Level 3
- C. Unfamiliar with Learning Levels

**2. Educational Objectives. After this presentation, attendees will be able to** (*2-3 objectives suggested*):

**3. Please list times available on Friday, May 12, 2017:**

**4. A) I will request an honorarium/fee to speak:**

- Yes
- No

**B) If applicable, please list your requested honorarium here: \_\_\_\_\_**

**8. A) Expense reimbursement for travel related to this presentation:**

- Yes
- No

**B) If applicable, please list your estimated travel needs here (hotel, airfare, mileage, etc.):**

**Please provide any other additional information, requests or special requirements to assist in the decision process:**