



## Mississippi Education and Technology Innovation Symposium July 17-19, 2019

MS Coast Convention Center Biloxi. MS

## PRESENTER REGISTRATION FORM

We would like to take this opportunity to invite you to share your knowledge, ideas and successes with colleagues from across the state at this year's METIS. This annual symposium is hosted by the Mississippi Department of Education/Office of Technology and Strategic Services. It is open to superintendent, administrators, IT/technical staff and directors, teachers, business managers, school improvement team members, program directors and anyone with an interest in the importance of quality data to improve student achievement.

<u>Please submit this registration form by April 5, 2019</u>. All forms will be read and reviewed by the METIS Committee. Selected presenters will be notified by **May 3, 2019**. If selected as a presenter, your <u>PowerPoint presentation will need to be submitted by **June 7, 2019**. Use a separate registration form for each proposed session.</u>

<u>Session Information</u>: All concurrent sessions are 45 minutes long. If you feel your presentation would require a double session (1 1/2 hours), please email the METIS Team. The presentation timeframe will include introductions, presentation material and Q&A. Presenters are responsible for providing copies of handouts and any materials that will be used during presentation. All session rooms are arranged classroom style and will be equipped with a podium, microphone, laptop and projector/screen. Presentations should provide attendees with educational value. Please refrain from promoting a specific business, product, or service.

## **PRESENTER INFORMATION:**

Presenter Name:		
Role/Title:		
School/Organization:		
Mailing Address: ☐ Work ☐ Home		
City:	State: Zip/Postal Code:	
Phone:	$\square$ Work $\square$ Home $\square$ Cell	
E-mail:		
About Presenter:		
$\square$ First time presenting at METIS $\square$ I have presented at METIS in the past		
Are you an exhibitor? $\square$ Yes $\square$ No	Does your presentation require sound? $\Box$ Yes $\Box$ No	

PRESENTATION INFORMATION	<u>ON</u> :
Session Title:	
Brief Description of your presen	tation: (a general overview of your session)
Which Track: ☐ Instructional ☐ Data ☐ Po	olicies & Standards
Which day(s) are you available?	<ul> <li>□ Day 1 (July 17)</li> <li>□ Day 2 (July 18)</li> <li>□ Day 3 (July 19)</li> <li>□ A.M.</li> <li>□ P.M.</li> <li>□ A.M.</li> <li>□ P.M.</li> <li>□ A.M.</li> <li>□ P.M.</li> </ul>
How many sessions on this topic?  Room capacity: (Please select or  □ 75 □ 150	P Day 1 Day 2 Day 3
Facilitator needed: (Monitor tim  ☐ Yes ☐ No	ne, temperature, crowd control, assist with handouts, etc.)
	resentation: (maximum of 2 complimentary)
Name:Phone:	Organization: Email:
Name	Ourse deskie en
Phone:	
Goals/Objectives: (briefly describ	e the goal/objective of your session)

Please email your presentation to <a href="mailto:metis@mdek12.org">metis@mdek12.org</a>

<u>Presenters receive no compensation for their services; this is strictly on a volunteer basis</u>

For more information, please contact Barbara Young or Debra Hines at 601-359-3487 or email <a href="mailto:metis@mdek12.org">metis@mdek12.org</a>.

Please save this form and email to <a href="mailto:metis@mdek12.org">metis@mdek12.org</a>.