

# Foreign Language Association of Virginia

FLAVA CONFERENCE 2006, October 13-14, 2006

Holiday Inn Select Koger South Conference Center

Richmond, Virginia

Session Proposal  
Online proposal form available at  
[www.flavaweb.org](http://www.flavaweb.org)

**Deadline:**  
**May 31, 2006**

Conference Theme:

***Discover Languages: 2006 and Beyond***

ALL INFORMATION MUST BE TYPED or PRINTED.

Session Title: \_\_\_\_\_

<b>Session Format</b>	<input type="checkbox"/> Presentation	<input type="checkbox"/> Discussion	<input type="checkbox"/> Panel	<input type="checkbox"/> Workshop
<b>Session Length</b>	All sessions are limited to 45 minutes.			

Fill out the following information. If you are not submitting online, please type this information on a separate sheet.

Session title:

Description of the content of session (not to exceed 150 words):

Method of presentation:

Benefits to the participants:

Program Abstract (not to exceed 50 words):

The reviewers reserve the right to edit the program abstract if necessary.

<b>Focus:</b> <input type="checkbox"/> all languages <input type="checkbox"/> German <input type="checkbox"/> French <input type="checkbox"/> Latin <input type="checkbox"/> Spanish <input type="checkbox"/> Russian <input type="checkbox"/> Japanese <input type="checkbox"/> Other _____ (specify)	<b>Audience:</b> <input type="checkbox"/> elementary <input type="checkbox"/> middle grades <input type="checkbox"/> secondary <input type="checkbox"/> post-secondary <input type="checkbox"/> supervisors <input type="checkbox"/> all levels	<b>Language of Presentation:</b> <input type="checkbox"/> English <input type="checkbox"/> Other _____ (specify)	<b>Check one box:</b> <input type="checkbox"/> Publisher's session <input type="checkbox"/> Exhibitor/Vendor's session <input type="checkbox"/> Consultant <input type="checkbox"/> Instructor/ <input type="checkbox"/> Supervisor <input type="checkbox"/> Other: _____ (specify)
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Each presenter on a team or panel must complete the following information. The **principal presenter is responsible** for submitting all forms together and on time. **No presentation may have more than three (3) participants.**

**Presenter #1:** \_\_\_\_\_

e-mail address: \_\_\_\_\_

Home Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_

School/Work Address: \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

**Presenter #2:** \_\_\_\_\_

e-mail address: \_\_\_\_\_

Home Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_

School/Work Address: \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

**Presenter #3:** \_\_\_\_\_

e-mail address: \_\_\_\_\_

Home Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_

School/Work Address: \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

AV Equipment Required:  Overhead Projector/Screen  TV/VCR

Computers, laser disk players and projection panels or media projectors cannot be provided by FLAVA.

**Deadline:  
May 31, 2006**

Submit six (6)  
copies to ☞

Sue Robertson, FLAVA Program Co-Chair  
12211 Diamond Hill Drive  
Midlothian, VA 23113  
<Katherine\_Robertson@ccpsnet.net> (for questions)