

“Computing and Missions/Adventist Virtual Learning Network-2002”

Please print this page, complete it and fax or mail to the address given below:

Presentation title: (please type or print)

Primary presenter information:

For additional presenters, attach separate sheet with above information

Name: _____

Department: _____

Institution: _____

Address: _____

Fax number: _____

Home phone number: _____

Work phone number: _____

Email address: _____

Type of session

Poster Demonstration

Display your innovative teaching results with posters placed on tables and handouts summarizing your work.

Table Clinic / Computer Demonstration

Present and explain your work in interactive small group sessions, possibly using computer.

Audio/visual requirement

You will need to bring your own computer. Please check what you would like us to provide for you:

Slide projector

Overhead projector/Screen

Electrical Outlet (for Poster Demonstration)

VCR/Monitor

Flip Chart

Internet Connection

Other _____

Attach additional sheet(s) with the following information:

- Presentation objectives
- Presentation description (75 words maximum) of your session. This will be included in the conference program and is an excellent opportunity to interest potential participants in your session.

Please mail this form and attached information to:

AVLN Computing and Missions Conference, Dr. Gail Rice, Loma Linda University
School of Public Health, Nichol Hall Room 1516A, Loma Linda, CA 92350, Email
address grice@sph.llu.edu, Telephone (909) 558-4276, or fax a copy to (909)
558-4291.