Alaska Rural Water Association

 2015 Annual Training Conference

 Speaker Biography and Training Narrative

***This form is required for ADEC course approval and CEU assignment.***

***Use one form for each class being submitted for approval.***

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| **Speaker Name:** |
| **Company Name:** |
| **Address:** |
| **Address Line 2:** |
| **City:** | **State:** | **ZIP:** |
| **Phone:** | **Fax:** |
| **Email:** | **Cell:** |
| **Speaker Biography: *(Brief description, 4-6 sentences.)*** |
| **Class Title:** |
| **Class Length (Hours):**  □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 |
| **Training Track:** □ Water □Wastewater □ Source Water/Regulatory/Engineering |
| **Brief Description:** |
| **\*\*\* For Office Use Only \*\*\*** |
| **CEUs Assigned:**\_\_\_\_\_\_\_\_\_\_ □ Core □ DW Core □ Non-Core □ None |