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.***

|  |  |  |  |
| --- | --- | --- | --- |
| **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 | | | |