

ONE IMPACTFUL DAY TO LEARN, LEAD & SUCCEED

## BUSINESS SUMMIT WORKSHOP PROPOSAL

|  |   |
|--|---|
| <p>Deadline for submission:<br/> <b>July 31, 2015</b></p> <p><i>Proposals received after this date will not be considered.</i></p> | <p>Notification of successful applicants:<br/> <b>August 14, 2015</b></p> <p><i>While the committee thanks all those who apply, only those selected will be contacted</i></p> |
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Thank you for submitting a Workshop Proposal for the 2015 Durham Region Business Summit hosted by the Whitby Chamber of Commerce. Multiple submissions are welcome; one proposal per submission, please.

The focus of the day is on Leadership and helping Business Owners better manage their businesses.

### INSTRUCTIONS AND RELEVANT INFORMATION:

- Proposals must be submitted in the format provided.
- All** sections must be completed. *Partially completed submissions will not be considered.*
- Workshops should fill 40 minutes and no more and will be presented twice during the afternoon session.
- Audience sizes range from approximately 10 to 80 participants from small to medium sized businesses (3-50 employees)
- Please review the conditions and sign/type your name to indicate agreement
- Send only completed forms to [admin@whitbychamber.org](mailto:admin@whitbychamber.org)

|  | PRESENTER PROFILE |
|--|-------------------|
| Presenter(s) Name:                       |                   |
| Email:                                   |                   |
| Phone #:                                 |                   |
| Designation(s):                          |                   |
| Company Name:                            |                   |
| Years you have been in this business     |                   |
| Biography:<br>(Please limit to 50 words) |                   |

|   |  |               |  |
|---|--|---------------|--|
| <p>Previous<br/>presenting experience<br/>(e.g.: conferences, workshops<br/>etc. YouTube links if applicable)</p>                       |  |               |  |
| <p>Introduction:<br/>Provide a one minute (150<br/>words or less) introduction for<br/>the facilitator.</p>                             |  |               |  |
| <p style="text-align: right;"><b>REFERENCES</b></p>   |  |               |  |
| <p>Provide two references who can comment on your skills as a presenter and the proposed workshop's suitability for the conference.</p> |  |               |  |
| <p>Name:</p>  |  |               |  |
| <p>Email:</p>   |  | <p>Phone:</p> |  |
| <p>Name:</p>  |  |               |  |
| <p>Email:</p>   |  | <p>Phone:</p> |  |

## WORKSHOP PRESENTATION PROFILE

|   |                |  |                  |
|---|----------------|--|------------------|
| <b>Learning Track:</b><br>(Select the most appropriate track for your workshop)   | <b>Talent</b>  |  | <b>Marketing</b> |
|   | <b>Finance</b> |  |                  |
| <b>Workshop Title:</b><br>(Must be fewer than 10 words)   |                |  |                  |
| <b>Workshop Synopsis:</b><br>To be printed in the Business Summit Program.<br>(Must be fewer than 50 words)   |                |  |                  |
| <b>Workshop Outcomes:</b><br>Provide 3 points your audience will learn from your presentation.  |                |  |                  |
| <b>Detailed Description:</b><br>Provide a detailed outline of your presentation including theme and desired outcome.<br>(Must be fewer than 200 words)<br>For Committee evaluation. |                |  |                  |
| <b>Additional Considerations:</b><br>Provide additional comments in support your application.<br>(In the space provided)  |                |  |                  |

## FACILITIES REQUIREMENTS

|   |                          |                         |                          |         |
|---|--------------------------|-------------------------|--------------------------|---------|
| Visual Aids/Support:<br>(Check all you require.)  | <input type="checkbox"/> | Flip Charts & Markers   | <input type="checkbox"/> | Lectern |
|   | <input type="checkbox"/> | Screen/Laptop/Projector | <input type="checkbox"/> | Table   |
| Handouts: Copies will be supplied by the Conference Committee if originals are received by <b>September 20, 2015</b> ; otherwise, presenter will be responsible for supplying their own copies  |                          |                         |                          |         |
| AV Equipment: The Conference Committee will provide equipment such as screens, laptop and digital projector. All presenters must be prepared to supply any digital presentation on a thumb drive or USB stick. Microphones will not be available in the workshop rooms. |                          |                         |                          |         |

## CONDITIONS:

The following conditions must be met for submissions to be considered. As a presenter, I understand that:

1. Once my workshop proposal has been approved, I agree that I will not change the topic or alter the content substantially without prior notification and approval from the Business Summit Committee. I agree to make myself available to BSC for rehearsal or presentation, if requested to do so.
2. I will provide an 8" x 10" digital colour headshot (minimum of 300 dpi) for promotional purposes by **September 15, 2015**.
3. My photo and workshop information may be used for Summit promotional purposes.
4. Materials presented remain my own intellectual property; any handouts must include a clause specifying any copyrights (if applicable) and/or restrictions on copying.
5. I am responsible for arranging any video recording of my workshop; participants must be informed of such before the workshop begins.
6. The Business Summit Committee will arrange for workshop facilitators.
7. There will be no financial compensation for presenting this workshop.
8. My name and/or company name will appear in the Business Summit Program and any promotional material as well as social media where appropriate, at the discretion of the Whitby Chamber.
9. I am barred from selling any products or services during my presentation. Marketing materials may be displayed at the back of the room during my presentation only.

I acknowledge I have read and agree to all of the above conditions, and that all of the information I have provided in this application is correct, to the best of my knowledge.

|                 |  |
|-----------------|--|
| Date:           |  |
| Signature/Name: |  |

**We look forward to seeing you at the conference!**