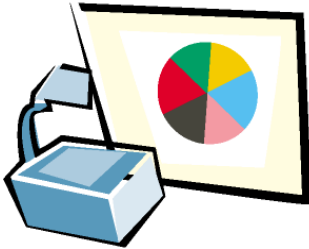


Call for Workshop Proposal



**Pennsylvania's 9th Annual Alternative Education
Conference and the International Association for
Learning Alternatives 36th @ Villanova University, June 20-22, 2007**

Workshop Title: _____

Workshop Description: *(50 words or less)*
(Please note that if the workshop is selected, this description will be used in the conference program.)

Presentation Format (circle one):

Lecture Panel Interactive Workshop

Intended Audience? *Administrators Teachers Counselors Other* _____

Preferred Time (circle one): *Wednesday pm Thursday pm Friday am*

Number of Sessions: Presentation Requires: one____ two____
(One session equals 75 minutes)

Equipment: Due to high costs, security, and other concerns, laptop computers and LCDs will be the responsibility of the presenter to bring to their workshop. If you need an overhead projector, please check here _____

LEAD PRESENTER :

Name _____ Title _____

Agency _____

Agency Address _____

Telephone (Daytime) _____ Email Address: _____

SUBMIT THIS FORM TO:

SIDNEY DOMAN (sdoman@nlyfs.com) New Life Youth and Family Services
1-610287-7884 Ext 1021 Freeman School Rd. Harleysville, PA 19438

PRESENTERS BIOGRAPHY

Lead Presenter, please include a 50 word biographical paragraph for yourself and each additional presenter as listed on previous page.

Lead Presenter Bio.

Presenter #1 Bio

Presenter #2 Bio.

Presenter #3 Bio.

Add additional presenters as needed.