

RIC SPEAKER CONFIRMATION FORM

Session Information (Session Chair or Coordinator to Complete):

Session Date <div></div>	Time of Session (7:00, etc.) <div><div></div> = <div></div> <div></div></div>	Session Number <div></div>
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Session Title

Name of Session Chair	Phone Number of Session Chair	E-mail Address of Session Chair

Name of Session Coordinator	Phone Number of Session Coordinator	E-mail Address of Session Coordinator

Speaker Confirmation Information (Speaker to Complete):

Please TYPE the requested information below. Please refrain from using abbreviations and ensure that acronyms are spelled out. Applicable information will be used for the purpose of populating the on-line conference program.

Speaker's Full Name	Speaker's Full Position Title	Speaker's Organization Name

Speaker's Business Mailing Address (City, State & Zip code)	Speaker's Business Telephone Number	Speaker's Business E-mail Address

Speaker Presentation Information (Speaker to Complete):

Proposed Presentation Title

Speaker Biographical Information (Speaker to Complete):

Please provide a short biography in narrative form below. The information will be used for introductions at the conference and will be posted on the RIC public website.

[illegible]

Date Submitted: (MM/DD/YYYY)		Please save form and submit via e-mail to: RICMST.Resource@nrc.gov
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