

# CALL FOR APPLICATIONS - WINTER 2011/SPRING 2012 SEMINARS & WORKSHOPS



# Bright I D E A S

PROFESSIONAL DEVELOPMENT SERIES



## THE KNOXVILLE CHAMBER IS CURRENTLY SEEKING PROPOSALS FOR ITS EDUCATIONAL SERIES.

Bright Ideas workshops and seminars can range in length from 1-hour to 3 hours, depending on the time needed to thoroughly cover the subject. The application deadline for workshops to be given February - June 2012 is December 9, 2011. A task force made up of Chamber members will review the applications and select the speakers on or near January 10, 2012.

## WE ARE INTERESTED IN SEMINARS ON THE FOLLOWING TOPICS

(however, submittals on other topics will be considered)

### FINANCE & OPERATIONS TOPICS

- HR Law
- Immigration Law
- Cash Flow Management
- Cost Containment

### MARKET & RELATIONSHIP SAVVY TOPICS

- Advertising 101
- How to Measure Your Advertising Efforts
- Design and Execution of a Public Relations Campaign
- How to Prospect For New Clients
- How to Keep The Clients You Have (Customer Service)
- How to Network
- The Design, Execution, and Evaluation of a Survey
- How to Use Social Networking To Grow Business

### TECHNOLOGICALLY AWARE TOPICS

- How to use the Internet for Business Related Research
- eCommerce 101
- Utilizing Mobile Technology
- Understanding Website Analytics
- Emerging Technology

### PERSONALLY & PROFESSIONALLY PREPARED TOPICS

- Strategic Planning
- Management Development
- Time Management
- Project Management
- Conflict Management
- Leadership Training
- How to Attract and Keep "A" Team Employees
- Ways (other than \$\$) to Reward Employees

To formally apply to be a Bright Ideas presenter please return this application along with any supporting documentation. Incomplete proposals will not be considered. Your business must be a member of the Chamber to be considered. Mail or email to:

Lynsey Wilson, Events Coordinator [lwilson@knoxvillechamber.com](mailto:lwilson@knoxvillechamber.com) • Knoxville Chamber, 17 Market Square #201, Knoxville, TN 37902

## BRIGHT IDEAS SPEAKER APPLICATION (Attach additional sheets as necessary)

### LEAD PRESENTER INFORMATION

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

### CO-PRESENTER INFORMATION

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**PRESENTATION INFORMATION**

Title: \_\_\_\_\_

What topic (see reverse) will your presentation cover? \_\_\_\_\_

Length of presentation: \_\_\_\_\_

What objectives/skills will participants learn from your presentation? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PRESENTATION ABSTRACT** (this paragraph will be used to help promote your workshop should it be selected)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SPEAKERS FEE\*:** \_\_\_\_\_

Please note that the Chamber prefers workshops offered at no charge. However, if a fee is required, it must be accompanied by a money-back guarantee.

**AV/PRESENTATION REQUIREMENTS** Please check any audio/visual needs you will have

Laptop     Flip Chart     LCD Projector     Dry Erase Board w/Markers

Other (specify) \_\_\_\_\_

**ATTACHMENTS**

Please attach a copy of your bio.

Please attach an outline of your presentation, or if using PowerPoint, a handout of your slides (6 per page).

**REFERENCES** Please provide 3 professional references who can attest to your presentation skills.

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**AGREEMENT**

1. No more than two-percent of the total seminar time may be spent promoting the company's products or services. Presenters will be offered one table to display handouts, brochures or other materials and will be provided a list of attendees for follow-up.
2. The Chamber reserves the right to change, cancel or add any sessions based on registration numbers.

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a presenter, any false statements, omissions or other misrepresentations made by me on this application may result in my immediate dismissal from the series.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OUR POLICY**

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age or disability.

