



# THE KNOXVILLE CHAMBER IS CURRENTLY SEEKING PROPOSALS FOR IT'S LUNCHEON EDUCATIONAL SERIES, CHAMBER U.

These 1.5 hour educational workshops will take place over lunch (11:30 a.m. to 1:00 p.m.)

There will be 6-8 sessions held in 2009. March 3, April 7, May 5, July 21, September 15, November 17 and two potential dates TBD.



**The application deadline for potential speakers is December 17, 2008**

*An independent committee will review applications, and selected presenters will be notified prior to January 16, 2009*

*Based on feedback from Chamber U attendees in 2008, we are interested in seminars on the following topics (however, submittals on other topics will be considered):*

MARKETING	PERSONAL DEVELOPMENT	SALES	TECHNOLOGY
<ul style="list-style-type: none"> <li>Utilizing Web 2.0 in Marketing</li> <li>Measuring &amp; Maximizing Marketing Efforts</li> <li>Generation Marketing</li> <li>How to Buy Media Advertising</li> </ul>	<ul style="list-style-type: none"> <li>How to Network</li> <li>Time Management</li> <li>Effective Presentations</li> <li>Personal Branding</li> <li>Leadership</li> </ul>	<ul style="list-style-type: none"> <li>New Sales Techniques</li> <li>Art of Negotiation</li> <li>Customer Service Strategies</li> <li>Prospecting Tips</li> </ul>	<ul style="list-style-type: none"> <li>Understanding Web 2.0</li> <li>Mobile Connectivity Secrets &amp; Tips</li> </ul>

To formally apply to be a Chamber U presenter, please mail 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 to: **Lori Fuller, Events Manager** • [lfuller@knoxvillechamber.com](mailto:lfuller@knoxvillechamber.com)

Knoxville Chamber, 17 Market Square, #201, Knoxville, TN 37902



## CHAMBER U 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: \_\_\_\_\_

### TITLE OF PRESENTATION

Please include title and short paragraph that describes your presentation. Please note that this information may be used on promotional materials for the series if your application is selected.

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### PROGRAM GOALS

Please summarize objectives/skills that participants can anticipate learning from your presentation.

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## RECOMMENDED AUDIENCE

Please identify the primary target audience for your presentation (circle top three)

- Owners, Presidents & CEO's
- Mid-level Management
- Human Resource Staff
- Other Staff (specify) \_\_\_\_\_
- Specific Industry (specify) \_\_\_\_\_
- Small Businesses (under 75 employees)
- Large Businesses (over 75 employees)
- Other (specify) \_\_\_\_\_

## PRESENTATION ABSTRACT

Please submit your presentation abstract in narrative and/or bullet form. (Attach additional sheets as necessary)

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## PRESENTER(S) BIO(S)

Please include a three to four sentence bio that will be used on promotional materials for the program.

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## AV / PRESENTATION REQUIREMENTS

Please list any audio/visual or presentation needs to be provided by the Chamber. Circle all that apply. Also, specify if you will be bringing your own equipment. Room set up will depend primarily on location. If your presentation requires a specific room set up, please include that in this section.

- Laptop
- Overhead Projector
- Dry Erase Board w/Markers
- Flip Chart
- Overhead Projector
- Slide Projector
- LCD Projector
- Podium
- Other (specify) \_\_\_\_\_

## ATTACHMENTS

Please provide a copy of any materials that will be used during the presentation (i.e. PowerPoint slides, handouts, brochures, etc.) Please attach a current headshot or email an .eps version to [lfuller@knoxvillechamber.com](mailto:lfuller@knoxvillechamber.com)

## REFERRALS

Three professional references must be provided.

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## AGREEMENT

- 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 with a list of attendees.
- Workshops offered at no charge are encouraged and preferred. If a fee is required, it must be included in the proposal. All programs requiring a fee must offer a 100 percent money back guarantee of satisfaction and Chamber members must be offered a significant discount vs. non-member attendees (minimum of 33%).
- The Chamber reserves the right to change any sessions due to a lack of registrations and to include additional sessions, based on interest level.

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. Thank you for completing this application and for your interest in programming with us. If you have further questions about Chamber U, please contact Lori Fuller, Events Manager, at 865-637-4550 or by email at [lfuller@knoxvillechamber.com](mailto:lfuller@knoxvillechamber.com)