

# Presenter Application for PAPERS Conferences

PAPERS mission is to function as a central resource for educational purposes and act as a networking agent for all public plans through our annual conferences. PAPERS' annual Forum each spring and the Fall Workshop give those who work in or provide services to Pennsylvania's public pension funds an extraordinary opportunity to share their expertise. As our goal is provide education sessions designed to improve financial and operational performance of public employee retirement systems, we encourage our member firms to make presentations during our conferences. Most presentations are 50 minutes in length.

If you are interested in presenting at one of PAPERS' upcoming conferences, please complete the information below and return: Mail: PAPERS, P.O. Box 61543, Harrisburg PA 17106  
Fax: 717-754-0122; E-mail: [kdeklinski@msn.com](mailto:kdeklinski@msn.com)

All submissions will be acknowledged. If you do not receive an acknowledgement, please let us know.

Presentation Title \_\_\_\_\_

Brief Description of Presentation \_\_\_\_\_  
\_\_\_\_\_

What format will you use for your presentation?

Check One:  Individual presenter  Team presentation  Panel discussion

For each presenter, please provide name/title, e-mail address and phone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE NOTE: All PowerPoint presentations and speaker information (brief bio & photo) must be submitted approximately one month prior to conference. Specific details will be provided to presenters well in advance.**

Most or all presentations will be considered a requirement for obtaining a PAPERS certification in the Public Pension arena. Members should achieve a certain level of expertise after attending each session. Please consider your presentation and list 5 questions participants should be able to answer after attending this session:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Please check if:

Your firm is a current corporate (Associate or Affiliate) member of PAPERS

Your firm is willing to become a conference sponsor

Application submitted by:

Name/Title \_\_\_\_\_ Date \_\_\_\_\_

Firm \_\_\_\_\_

E-mail Address \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

If you are not the primary contact for this presentation, please provide name/e-mail address and phone number for primary contact.

THANK YOU!!