

ASSOCIATION OF TEACHERS OF MATHEMATICS OF NEW YORK CITY
In conjunction with The Hunter College Mathematics Center for Learning and Teaching

SPEAKER PROPOSAL FORM
ANNUAL FALL CONFERENCE
SATURDAY, NOVEMBER 22, 2008
at
HUNTER COLLEGE
LEXINGTON AVENUE at 68th STREET
NEW YORK, NY

SPEAKER

NAME: _____

HOME ADDRESS: _____

HOME TELEPHONE: () _____

HOME FAX: () _____

e-MAIL ADDRESS: _____

SCHOOL or AFFILIATION: _____

SCHOOL or AFFILIATION ADDRESS: _____

SCHOOL or AFFILIATION TELEPHONE: () _____

SCHOOL or AFFILIATION FAX: () _____

TITLE: _____

Circle grade(s) that
presentation will cover:

K 1 2 3 4 5 6 7 8 9 10 11 12
College-level

SPEAKER'S LEVEL OF RESPONSIBILITY:

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Classroom teacher | <input type="checkbox"/> Administrator | <input type="checkbox"/> Supervisor |
| <input type="checkbox"/> Univ/College Professor | <input type="checkbox"/> Publisher Representative | <input type="checkbox"/> Other _____ |

Title of Presentation:

NOTE: Presentations should be approximately one hour fifteen (75) minutes.
Please provide a short abstract of the presentation for the conference program.

Completed Speaker Forms and questions should be directed to our conference co-coordinator:

ATMNYC
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5444 ARLINGTON AVENUE - #G-22
RIVERDALE, NY 10471-1281
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Speakers will be notified of the acceptance of their presentations.

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