

# 2019 Governor's Hurricane Conference® Proposed Presentation

1. **Type of Session** (choose only one):

Training Session      Training Session Length: \_\_\_\_\_ (in 1 ½ hour increments up to 3 days)

Maximum # of attendees: \_\_\_\_\_

Workshop (1 ½ hours)

Roundtable (1 ½ hours)

2. **Interest Area:**

Business and Industry

Communication/Public Information

Emergency Management

Emergency Services

Human Services/Mass Care

Logistics & Resource Support

Healthcare

Policy/Planning

Recovery/Mitigation

3. **Level:**    Basic     or    Advanced

4. **Suggested Title:** \_\_\_\_\_

5. **Target Audience(s):**

6. **Description:**

7. **Submitted by:**    Name: \_\_\_\_\_  
                                  Agency: \_\_\_\_\_  
                                  Address: \_\_\_\_\_  
                                  Phone: \_\_\_\_\_  
                                  Email: \_\_\_\_\_