

Continuing & Professional Education Pavilion, Suite 221, 2590 TAMU College Station, TX 77843

BIOGRAPHICAL DATA FORM

Instructions: Use this format to provide documentation of an individual's expertise as member of the planning committee member or as a presenter (content specialist) for this activity. Please attach 2 page resume or CV.

Name:				
	(Name an	d Degrees)		
Preferred Contact Address:				
	(Number a	and Street)		
	(City, State a	and Zip Code)		
Preferred Contact Telephone:		_ FAX:		-
E-mail Address:				
Present Position:				=
	(Employe	er, job title)		
Education (include basic preparation	n through high	nest degree held)		
Degree Institution (Name, City	, State)	Major Area of Study	Year Degree /	Awarded
1				
2				
3				
4				
Title of Activity				
Biographical Data				
Use the space to below briefly descri	ha vaur profe	essional experience as it relat	too to vour rolo in	thio
continuing education activity, e.g., pro				