1. Webinar Title

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| --- |
| Click or tap here to enter text. |

1. Webinar Description

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| Click or tap here to enter text. |

1. Webinar Objective

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| Click or tap here to enter text. |

1. Webinar Level

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|[ ]  Introductory |
|  |  |
|[ ]  Intermediate |
|  |  |
|[ ]  Advanced |
|  |  |

1. Webinar Length

|  |  |
| --- | --- |
| Click or tap here to enter text. | Hours |
|  | If other than hour format, please specify in the text box below: |
|  | Click or tap here to enter text. |

1. Proposed dates and times

Month\*: Click or tap here to enter text.
Day(s)\*\*: Click or tap here to enter text.
Time\*\*\*: Click or tap here to enter text.

\*Month: should be at least two months away from the day you submit this proposal.
\*\*Day(s): should not be scheduled on a week that contains a holiday or during SCHC Spring or Fall meeting days.
\*\*\*Time: Webinars will be scheduled anytime between 11:00 am and 3:00 pm Eastern time.

1. Course Coordinator

|  |  |
| --- | --- |
| Name and Credentials | Click or tap here to enter text. |
| Position/Title | Click or tap here to enter text. |
| Company | Click or tap here to enter text. |
| Address | Click or tap here to enter text. |
| City: | Click or tap here to enter text. | State: | Click or tap here to enter text. | Zip: | Click or tap here to enter text. |
| Country: | Click or tap here to enter text. | Phone: | Click or tap here to enter text. | Email: | Click or tap here to enter text. |
| Biography as it will appear in the brochure | Click or tap here to enter text. |

1. Course Instructor (If no one else is instructing this course, please write ‘Does not apply’ in the ‘Name and Credentials’ space y the following tables).

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| --- | --- |
| Name and Credentials | Click or tap here to enter text. |
| Position/Title | Click or tap here to enter text. |
| Company | Click or tap here to enter text. |
| Address | Click or tap here to enter text. |
| City: | Click or tap here to enter text. | State: | Click or tap here to enter text. | Zip: | Click or tap here to enter text. |
| Country: | Click or tap here to enter text. | Phone: | Click or tap here to enter text. | Email: | Click or tap here to enter text. |
| Biography as it will appear in the brochure | Click or tap here to enter text. |

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| Name and Credentials | Click or tap here to enter text. |
| Position/Title | Click or tap here to enter text. |
| Company | Click or tap here to enter text. |
| Address | Click or tap here to enter text. |
| City: | Click or tap here to enter text. | State: | Click or tap here to enter text. | Zip: | Click or tap here to enter text. |
| Country: | Click or tap here to enter text. | Phone: | Click or tap here to enter text. | Email: | Click or tap here to enter text. |
| Biography as it will appear in the brochure | Click or tap here to enter text. |

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| Name and Credentials | Click or tap here to enter text. |
| Position/Title | Click or tap here to enter text. |
| Company | Click or tap here to enter text. |
| Address | Click or tap here to enter text. |
| City: | Click or tap here to enter text. | State: | Click or tap here to enter text. | Zip: | Click or tap here to enter text. |
| Country: | Click or tap here to enter text. | Phone: | Click or tap here to enter text. | Email: | Click or tap here to enter text. |
| Biography as it will appear in the brochure | Click or tap here to enter text. |

1. Agenda

Please submit a detailed preliminary agenda to your course. See an example below:

* *Introduction*
* *Classification Variances*
	+ *US*
	+ *Canada*
	+ *Europe*
* *Safety Data Sheet Variances*
	+ *US*
	+ *Canada*
	+ *Europe*
* *Q&A*
1. Photograph: Attach to your reply email a photograph per instructor. The photograph will be used in the brochure.
2. Is this course currently being offered or will be offered on another platform?

|  |  |
| --- | --- |
|[ ]  Yes |  |
|  | Platform website | Click or tap here to enter text. |
|  | Dates that will be offered  | Click or tap here to enter text. |
|  |  |  |
|[ ]  No |  |

YOUR PROPOSAL WILL NOT BE ACCEPTED IF ANY OF THE ABOVE POINTS IS MISSING.