Session Information Form

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| Presenter Name (and credentials): |  |
| Email address: |  |

The information below will be used on the CSMLS website and for marketing materials.

1. Session Title: *Maximum of 100 characters including spaces. Catchy titles are enticing to attendees!*

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1. Learning Objectives: *Please include 3 outcomes for attendees*

At the end of this session, you will be able to:

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1. Session description: *Maximum of 100 words - session descriptions over 100 words will be edited at our discretion.*

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1. Session Category: *Please select the category/discipline of your presentation (max. of 2 categories)*

[ ]  Chemistry

[ ]  Clinical Genetics

[ ]  Cytogenetics

[ ]  Cytology

[ ]  Education

[ ]  Ethics

[ ]  Hematology

[ ]  Histotechnology

[ ]  Immunology

[ ]  Information Technology

[ ]  Management

[ ]  Mental Health/Wellness

[ ]  Microbiology

[ ]  Point of Care

[ ]  Pre - Analytical

[ ]  Quality

[ ]  Safety

[ ]  Transfusion Science

[ ]  Other (please specify):

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1. Presenter’s Bio/Introduction: *Maximum of 100 words of third person prose - Introductions over 100 words or not written in third person will be edited at our discretion.*

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1. Photograph:

*Please include a recent colour headshot of yourself to be used in marketing material.*