

## Practical Computing Demonstration (PCD) Proposal Form

## **Contact Information**

Contact Name:				
Affiliation:				
Email:		Phone:		
Address:				
City:	State/Province:		ZIP/Postal Code:	
PCD Title:				
PCD Information (Required) Instructor Name(s):				
Affiliation(s):				
Fmail(s):				

Please provide the following directly to <a href="mailto:amy@amstat.org">amy@amstat.org</a>. If selected, you will be notified by August 25, 2018. Your commitment and payment will be due by September 5, 2018. Program descriptions are limited to 1,200 characters per section. Please email the following information about your PCD:

- Title
- Description
- Outline and Objectives
- About the Instructor
- Relevance to Conference Goals
- Brief Description of the Product

Return by August 15, 2018

to
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