



## Practical Computing Demonstration (PCD) Proposal

### Contact Information

Contact Name:

Affiliation:

Email:

Phone:

Address:

City:

State/Province:

ZIP/Postal Code:

PCD Title:

### PCD Information (Required)

Instructor Name(s):

Affiliation(s):

Email(s):

Please provide the following directly to [amy@amstat.org](mailto:amy@amstat.org). If selected, you will be notified by August 26, 2019. Your commitment and payment will be due by September 6, 2019. 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, 2019, to**

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