

# Latino Medical Student Association - 5th Annual National Conference - Call for Speakers

March 4-7, 2010  
University of Illinois at Chicago

Please return by e-mail to [conference@nnlams.org](mailto:conference@nnlams.org)

Facilitator or Speaker Name	
Degree(s)	
Position or Title	
Affiliated Institution or Organization	
Phone	
E-mail	

Workshop or Presentation Name ( Please propose a title for you workshop or presentation.)

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Specific Learning Objectives (Please specify specific learning objectives that you expect attendees to achieve at the end of your workshop or presentation.)

Objective 1	
Objective 2	
Objective 3	

Abstract / Brief Description

Please describe briefly the proposed content of your presentation or workshop. Who is the intended audience and what is the nature of the material to be presented

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Disclosures (Please indicate any potential financial disclosures)

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Preferred Date of Workshop / Presentation	March 5th	AM
	March 5th	PM
	March 6th	AM
	March 6th	PM