# Call for Presenters

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| --- | --- |
| Name\* | Click here to enter text. |
| Title | Click here to enter text. |
| Company | Click here to enter text. |
| Address Line1 | Click here to enter text. |
| Address Line 2 | Click here to enter text. |
| City | Click here to enter text. |
| State / Province | Click here to enter text. |
| Postal Code | Click here to enter text. |
| Country | Click here to enter text. |
| Phone (s) | Click here to enter text. |
| Email | Click here to enter text. |
| Website Address | Click here to enter text. |

***\*****Please include licensure and certifications (i.e., PE, AIA, CCP, LEED AP, , etc.)*

## Tell us about yourself.

*In one sentence tell us what makes you a knowledgeable and compelling presenter.*

Click here to enter text.

## Previous Presenting Experience

List up to three speaking engagements including the year, presentation format, topic, and length *(minutes)* of presentation. Please include an electronic copy of one presentation from the list below or a link to an online video featuring you as the presenter. *(Presentation should be within the last three years.)*

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| --- | --- |
| **Title 1** | Click here to enter text. |
| Venue | Click here to enter text. |
| Length | Click here to enter text. |
| **Title 2** | Click here to enter text. |
| Venue | Click here to enter text. |
| Length | Click here to enter text. |
| **Title 3** | Click here to enter text. |
| Venue | Click here to enter text. |
| Length | Click here to enter text. |

## Speaker References

Provide the name, organization and contact information *(email, telephone)* for two or more people who can attest to your speaking presentation skills.

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| **Name 1** | Click here to enter text. |
| Organization | Click here to enter text. |
| Contact | Click here to enter text. |
| **Name 2** | Click here to enter text. |
| Organization | Click here to enter text. |
| Contact | Click here to enter text. |
| **Name 3** | Click here to enter text. |
| Organization | Click here to enter text. |
| Contact | Click here to enter text. |

## Brief Biography

In 250 words or less provide a biographical summary of your work and experience as you would like it to appear in a conference agenda.

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| Click here to enter text. |

## What is your *most* accomplished and up-to-date Cx topic for public presentation?

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| Click here to enter text. |

## Cx *process* topics know the most about:

New Construction Cx Process  Monitoring Based (MBCx)

Existing Building Cx Process  Pre-Functional

Documentation  Functional Testing

Measurement and Verification  Voluntary/Regulatory Certification

Turnover and O&M Staff Training  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

System Manuals (Enhanced O&M)  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Cx *system* topics know the most about:

Whole Building Systems Integration  Fire / Life Safety Cx

HVAC Systems  Campus Central Plant Cx

Plumbing Systems  Electrical and Emergency Power

Building Envelope (BECx)  Security (Alarm Systems, Employee Access)

Lighting / Daylighting  Telecomm Systems

Audio/Visual Systems  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Cx *phase(s)* know the most about:

Predesign / Planning Phase Cx  Investigative Phase EBCx

Design Phase Cx  Implementation Phase EBCx

Construction Phase Cx  Turnover Phase EBCx

Occupancy Phase/Operations Phase Cx  Persistence Phase EBCx

Ongoing Phase Cx

## Facility *types* on which know the most about:

Office Buildings  Biocontainment Labs

Campus Portfolios  Cleanrooms

Hospitals & Heathcare Facilities  Schools K-12

Data Centers  Classified Sites

Retail Establishments  Libraries, Museums & Archives

Grocery Stores  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wet / Dry Labs  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The NCBC Committee is looking for qualified speakers that are able and willing to speak on a variety of topics. Although we are interested in the topic you are most interest in presenting we also want to know if you are willing to present on other topics that you are also qualified to speak to.

**Yes  No**

## Do you have a preferred length?

Enter amount of time here for your presentation..

## Audience (check all that apply):

Building Owners  Architects  Design Engineers

Facility Managers  Cx Professionals  Business Development

Construction Managers  TAB Consultants  Utility Rep / Program Managers

Control Contractors

## Check the box for the appropriate level of audience knowledge needed:

Introductory-Beginner  Applied-Intermediate  Strategic-Advanced

## Audience Interaction (how do you like to engage the audience):

Interview  Polling  Ask to submit questions

Games  Demo  Pre-presentation survey

Video  Other\_\_\_\_\_\_\_\_  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Learning Objectives (what will the audience take away from your presentation)

|  |  |
| --- | --- |
| **Objective 1** | Click here to enter text. |
| **Objective 2** | Click here to enter text. |
| **Objective 3** | Click here to enter text. |
| **Objective 4** | Click here to enter text. |

## Abstract:

*In 400 words or less, describe your subject, sources, argument, and conclusions. Include any details that recommend your presentation for inclusion. Please describe your abstract below.*

Click here to enter text.

## Put in a good word:

Is there anyone else that you think should present? What should they present on?

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

## How to submit:

Upon completion:

Save your Form using the following naming convention: LastName\_FirstName\_2016.docx

Please don’t save in a PDF.

Please submit forms to info@bcxa.org