



UGA CREATE CONFERENCE 2008
PARTICIPANT APPLICATION FORM

NAME _____
Last First Middle

HOME ADDRESS

CELL OR WORK PHONE _____

E-MAIL _____

HOME PHONE _____

PERSONAL INFORMATION:

Male Female

Date of Birth ____/____/____
MM DD YYYY

Social Security # _____

Nationality / Passport Country _____

PROFESSIONAL AFFILIATION:

INSTITUTION _____

POSITION _____

HOW DID YOU HEAR ABOUT THE CONFERENCE? _____

PERSON YOU PLAN TO ROOM WITH. IF YOU DO NOT HAVE A PREFERENCE, PLEASE WRITE

“NO PREFERENCE.” _____

TO CONTACT THE CONFERENCE COORDINATORS:

Bonnie Cramond, Director
Torrance Center
323 Aderhold Hall
Athens, GA 30602
Phone: (706) 542-4248
Fax: (706) 542-4659
Email: bcramond@uga.edu
Rebecca Nordin, Graduate Assistant
E-mail: CREATE08@uga.edu or rebeccan@uga.edu
<http://www.coe.uga.edu/epit/programs/>

**Mail, fax or email your application form to the address above by the application deadline.
Please send payment to this address or fax number as well.**

APPLICATION DEADLINE:

Friday, November 16, 2007

Applicants are STRONGLY encouraged to apply by the program deadline. After this date, applicants will be accepted only if the conference is not full.