



**UFCM Convocation Proposal 2008 Page 2.**

**Morning Session 10:00am-11:30am Afternoon Session 11:45am-1:15pm  
(Circle your choice)**

**List any reading or reference materials which may be used.**

- 1.
- 2.
- 3.
- 4.

**Prerequisites for enrollment if any:**

**Certificate Offered Upon Completion    Yes    No**

**List any audio/visual or other supplies which may be needed for this workshop.**

**(All Proposals must have sign approval of your Pastor)**

**Signature of Lead Workshop Presenter: \_\_\_\_\_**

**Telephone Number: (     ) \_\_\_\_\_**

**E-mail Address: \_\_\_\_\_**

**Address:**

**Approval of Pastor:**

**Signature: \_\_\_\_\_**

**Church: \_\_\_\_\_**

**Pastor's Name: Please Print \_\_\_\_\_**

