



NWTAA
NORTHWEST TERRITORIES ASSOCIATION OF
ARCHITECTS

Continuing Education Proposal Form

Submitted by: _____

Date Submitted: _____

Session Title: _____

Session Duration: _____

Con-Ed type: (Select one of the following) Structured ☐ Unstructured ☐

Format: (Select one of the following) Online ☐ In Person ☐

- Proposed venue location: _____

Speaker(s):

1. Name - brief bio

Session Description:

(provide description here)

Learning outcomes

At the end of this session, participants will be able to:

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

What is required of NWTAA to provide (if/as applicable):

1. Speaker costs/honorarium: \$
2. Venue: \$
3. Equipment/AV/other requirements and related costs that NWTAA is to provide:
 - a. Items:
 - b. Cost: \$
4. Other: \$
 - a. Description:

5. TOTAL COST: \$

Attach any images to use for newsletters/social media