Satellite Symposium Proposal Form

Return this form by October 1, 2009 to Hgoschinski@.gog.org

Satellite Symposium Application and Approval

To submit your proposal for a Satellite Symposium you must complete the application with the following information:

1. Proposed title of the meeting.
2. Names and contact information of the meeting organizers.
3. A brief description of the program objectives and the intended audience.

The GOG reviews all applications for Satellite Symposium with a view toward the quality of the proposed program. The GOG will notify the Medical Education Provider no later than October 16, 2009 of the acceptance/denial of the proposed program.

Symposium Organizer Name:					
Company Name:					
Address:					
City:		State:		Postal Code:	
Phone:		Fax:			
Email:					

Symposium Title:	

Description (short 2-7 sentences description of symposium topic)

Learning Objectives (provide three learning objectives for this session)

Submit by Email