

## Community Calendar Submission Form

<b>Name:</b>	<b>Date:</b> mm/dd/yyyy
<b>Employer:</b>	<b>Title:</b>
<b>Contact:</b>	<b>Phone:</b>

	Community Calendar Topic	DATE TO START	DATE TO BE REMOVED
•	Event		
•	Training		
•	Workshop		
•	Seminar		
•	Conference		
•	Fundraiser		
•	Continuing Education (CE) Offerings		
•	Other- please list		

**Please describe your submission in 50 words or less below include: date(s) and frequency, time(s), location, cost, learning objectives, modality (in person, virtual), registration link, web link to more information.**

<b>Description:</b>
<b>Registration Link:</b>

## Community Calendar Submission Form

Website Link for more information:

Receipt of this form does not guarantee acceptance all submissions will be reviewed for accuracy and relevance.

Date Approved & Initial: \_\_\_\_\_