# Texas SHRM Global HR Conference

Houston, Texas

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| Name |  |
| Email |  |
| Professional Designation(s) |  |
| Professional Bio (2 paragraph max) |  |
| Job Title |  |
| Company Name |  |
| Address |  |
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| State |  |
| Office Number |  |
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| Will your session be given by more than one person? If Yes, please list the name and related information for your co-presenter below. |  |
| Name (Co-Presenter) |  |
| Email Address (Co-Presenter) |  |
| Professional Designation (Co-presenter) |  |
| Professional Bio (Co-presenter) |  |
| Job Title (Co-Presenter) |  |
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| Title of Session: (We encourage speakers to be creative with presentation title; 8 words or less) |  |
| Describe the top THREE learning objectives of your presentation |  |
| In 75 words or less provide a summary of the content of your presentation |  |
| Do you have room set up requests (Please specify) |  |
| Other |  |
| If you have never spoken at the Texas SHRM Global HR Conference we ask that you please provide name, organization, email and phone number of THREE references that can attest to the quality of your previous presentations. |  |

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