



Speaker Biography Form

Please complete one form for each instructor. Resume and/ CV should not be submitted as a substitute.

Instructor Information:

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|---|--------------------------------------|-------------------------------------|-----------------|
| Name* | | | |
| Company* | | | |
| Position* | | | |
| Address* | City, State, Zip* | | |
| Telephone* | | | |
| Fax | | | |
| Email* | | | |
| Has this instructor completed a degree in interior design? | <input checked="" type="radio"/> Yes | <input type="radio"/> No | |
| Has this instructor passed the complete NCIDQ Exam? | <input checked="" type="radio"/> Yes | <input type="radio"/> No | |
| Is the instructor a member of a professional membership organization? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | Please Specify: |

References: (References may not be from co-workers at the same company, university or firm)

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|------------|--|--------|--|
| Name* | | | |
| Company* | | | |
| Position | | | |
| Address | | | |
| Telephone* | | Email* | |

| | | | |
|------------|--|--------|--|
| Name* | | | |
| Company* | | | |
| Position | | | |
| Address | | | |
| Telephone* | | Email* | |

Educational background: (degrees, discipline, university/school, and year of completion)

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Positions held in academic institutions: (title of position/rank, year and tenure)

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Positions held in design practice: (firm name, title, and year)

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Positions held in businesses that provided experience related to course subject matter: (firm name, title, description of experience related to course subject matter and year)

Awards, recognitions, grants, competitions:

Professional development: (conferences, classes, continuing education, etc., in the last five years)

Courses taught in the past two years:

50-100 word biography of the instructor:*

* indicates required field

Submitted by:

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|------------|------------------------------------|
| Name: | Sarah B Gregg, CEU Administrator |
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