OHIO DENTAL ASSOCIATION

*Informing – Representing – Serving*

**COURSE MONITOR APPLICATION FORM**
Ohio Dental Association Annual Session
September 11-14, 2014
Greater Columbus Convention Center, Columbus, Ohio

Completing this form indicates your interest to serve as an ODA representative during selected continuing education courses during the 2014 Annual Session. For consideration, this completed form must be returned to the ODA Annual Session Department **no later than August 1, 2014.**

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Phone: _____ Fax: _____ E-mail: _____

**What is your professional position?**

- O Dentist
- O Dental Hygienist
- O Dental Assistant
- O EFDA
- O Office Manager
- O Front Desk
- O Other _____

**Course(s) you are interested in monitoring:**

**1st Choice:** _____ (course code)

**2nd Choice:** _____ (course code)

**3rd Choice:** _____ (course code)

Please be sure you are registered for each course listed above. To thank you for your assistance, the Annual Session Committee will present you with a $25 gift card. You will also receive appropriate CE credit for each course in which you serve. By completing this form and accepting the terms contained herein, you acknowledge that you are undertaking the role of course monitor as a volunteer and that no employment relationship exists between you and the Ohio Dental Association or its affiliates.

**NOTE:** Course monitors for hands-on workshops are not guaranteed a seated position in the workshop.

Return this completed form by August 1, 2014 to: ODA Annual Session Department, 1370 Dublin Road, Columbus, OH 43215; (614) 486-0381 (fax), or kellyj@oda.org.

**Signature:** _____ **Date:** _____

Ohio Dental Association
1370 Dublin Road, Columbus, Ohio 43215-1098
Phone: 614-486-2700 Fax: 614-486-0381

**Responsibilities:**

**Course Monitor:**

- Greet the speaker in the assigned room approximately 15 minutes prior to the lecture.
- Review the set-up of the meeting room according to requested specifications provided.
- Introduce the speaker and make brief announcements regarding the meeting, CE credits, etc using a script provided by ODA staff.
- Make adjustments in room temperature, audio/visual equipment or replenishing water stations by notifying the ticket-taker, who will alert the appropriate convention personnel.
- You may be asked to assist with distributing evaluation forms. The ticket-takers are also available to assist the speaker with this task, at your direction.

Annual Session Committee members and/or ODA staff will check on each class periodically to make sure everything is running smoothly.

As part of your participation, we ask that you provide timely feedback to the ODA Annual Session Committee regarding course content, speaker presentation skills, seminar room arrangements, and audio/visual equipment. You will be given a comprehensive questionnaire to fill out in order to provide the appropriate feedback about the course you have served. Please return the questionnaire to the ODA no later than one week after the course.

After Annual Session, if any questions regarding your specific course(s) arise, ODA staff may contact you to gain your perspective. For example, if an attendee questions whether or not a topic was included in a presentation, you could provide input that would provide staff appropriate information to respond to that concern.

Please feel free to contact the ODA Annual Session Department with any questions or concerns. Thank you for your assistance!

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