REQUEST FOR CERTIFIED TRAINER

Name:	Title:
District:	Phone Number:
Date(s) Needed:	Location:
Trainer Requested:	
Type of meeting: Number of Expected Attended	es:
District Conference	District Convention
Regional Meeting	Special Meeting
Please check training areas requested of	Certified Trainer:
Officer training:	
Club Presidents	Club Presidents-Elect
Club Secretary-reasurers	Club Secretary-Treasurers-Designate
Lieutenant Governors	Lieutenant Governors-Elect
Presentations:	
Please indicate type of type of presentation (W=V	Workshop or A=All Attendees) in front of topics to be
covered, and note time (minutes) allocated in the	
Catch a Rising Star ()	Childhood Cancer Program ()
Communication ()	Fundraising ()
Having Fun at Meetings ()	JOOI ()
Just ask ()	Membership ()
Member Retention ()	Motivation ()
New Club Building ()	OI Foundation ()
Parliamentary Procedure ()	Personal Growth and Involvement ()
Strategic Planning ()	Team Building ()
	()
Skills Development Modules:	(
Choosing Optimism as Philosophy of Life (Creative Problem Solving ()
Diversity ()	Leadership Styles & Profiles ()
	Mentoring ()
Orientation to Optimism ()	Parliamentary Procedure ()
Public Speaking ()	Time Management ()
Team Building ()	
Certified Trainer is requested to be speaker at	: Breakfast Lunch Dinner
Topic to be covered:Time (n	
Other special trainers and dignitaries anticipated	
	fied Trainer's contact hours must equal at least 100 le times amount of time <u>Example</u> : (40 people times = 25 hours) = 105 total hours
FORWARD REQUEST TO: Stephan	nie Monschein, Director, Leadership Development st International

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