

Presenter/Facilitator Information:

information on any hands-on activities):

*Do you want to be assigned to a classroom? (All classrooms will be set up classroom style)

Would you like to be provided with lunch?

Company/Organization:

SHAWN BRINK

State Energy Education Coordinator
P: +701-323-4360 ext. 3131
E: shawn_brink@bismarckschools.org
W: t4ndsummit.org

Stanley Presenter/Facilitator Confirmation Form

November 18-19, 2025

Stanley Public School Campus, Mountrail County Complex & Mountrail County Fair Building
Session deadline is Monday, November 3, 2025

Title:

Email Address:							
Website:							
Physical Address:			Mailing Address:				
City:		State:			Zip Code:		
Telephone (To Publi	sh)						
Cell Phone:		Fax Number	er:				
Additional Preser	nter Information:						
Name:	Title/Company:		Email:		Phor	ne:	
Session/Activity/I	Demonstration In	formation	:				
•	will host up to 25 s						
 All students v 	vill be supervised by	an adult an	d will stay in their	group throι	ighout the da	y.	
	40 minutes with 10 i		•			,	
• There are 4 s	essions during each	dav. plus a i	general session.				
*Title of Session/Activity/Demonstration:			<i>ye.re.</i> u. eeee.e				
Title of Jession, A	ctivity/ Demonstratio	,,,,					
*Description of							
Session/Activity/De	emonstration:						
(a brief summary, in	ncluding detailed						

(*Required Information) See $Draft\ Schedule\ Attached$

Please email completed form to Shawn Brink - shawn-brink@bismarckschools.org Additional questions? Contact him at 701-323-4360 ext. 3131. Thank you!

YES

Organizing Sponsors:



NO

I do not want a classroom, I would

*Equipment, simulators, other: Please explain requirements!

like _____ feet x ____ feet for my session.