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| **Specialist Session Request Form JANNAF 52nd CS / 40th APS /   40th EPSS / 34th ESHS / PIB**  **Joint Subcommittee Meeting** | | |
| This form is necessary to hold a specialist session at this meeting; please fill out all the required information and submit to your JHU WSE ERG technical representative or to the JANNAF Meeting Planning Team at [meetings@erg.jhu.edu](mailto:meetings@erg.jhu.edu).  Specialist sessions must be approved in order to be included in the JANNAF meeting Final Program; this form is the first step in the approval process.  **Specialist session requests, *including* Draft Agenda, must be received by the abstract submission deadline, 9 June 2023.** | | |
| **\* Required fields marked with an asterisk** | | |
| Session Title:**\*** | | |
| Submitted for consideration by: | Phone: | Email: |
| Security Classification: **\***  Unclassified  Secret | | |
| JANNAF Subcommittee: APS  CS  EPSS  ESHS  PIB  JPM  LPS  MSS  PEDCS  HTMAS  SEPS  SMBS  SPS | | |
| Proposed Day / Date:  Mon, 12/4/23  Tues, 12/5/23  Wed, 12/6/23  Thurs, 12/7/23  Fri, 12/8/23 | | |
| Proposed Length, including breaks:  4 hours  8 hours  2 Day Other: | | |
| Do you Plan to Require Papers?  Yes  No | | |
| **Session Chair\*** | | |
| Title:  Dr.  Mr.  Ms.  Other | | |
| Name: | Organization: | |
| Work Address: | | |
| City: | State: | ZIP Code: |
| Daytime Phone: | Email: | |
| **Session Co-Chair (if applicable)** | | |
| Title:  Dr.  Mr.  Ms.  Other | | |
| Name: | Organization: | |
| Work Address: | | |
| City: | State: | ZIP Code: |
| Daytime Phone: | Email: | |
| **Background\*** | | |
| Please briefly describe the technical need for this specialist session. This description will form the introductory text for the session in the JANNAF meeting program.  Insert background here. Section will expand to accommodate your text. | | |

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| **Agenda\* Draft agenda must be included at time of initial request (due by 9 June 2023)** | | |
| **This form will be returned to the submitter if draft agenda is not included.** **For each agenda item include the presentation title, presenter’s name, and email address, as well as an approximate presentation start time and length.** Each Invited Presenter is ***required*** to submit their Invited Presentation details via the online Abstract Submittal site **no later than 25 August** for inclusion in the Preliminary Program, or by 6 October for inclusion in the Final Program. Forward the [Instructions for Submitting Invited Presentation Details](https://www.jannaf.org/mtgs/2023Dec/images/How_to_Submit_Invited_Presentation_Details.pdf) to all invited presenters. Early submission is **strongly** recommended.  Insert your agenda, including approximate presentation start times and length, presentation titles, and author/presenter names here... Section will expand to accommodate your agenda. | | |
| **Expected Outcomes/Deliverables (Identify Office/Person Responsible)\*** | | |
|  | **Deliverables** | **Office/Person Responsible** |
| **Executive Summary for Proceedings** (Due 6 weeks after the JANNAF meeting, accompanied by a clearance form) | Yes  No |  |
| Presentations | Yes  No |  |
| JANNAF Papers | Yes  No |  |
| Presentation/Paper Clearances | Presenters  Chair |  |
| **Signatures of Approval\*** | | |
| **Approver** | **Name** | **Signature** |
| Mission Area Chair |  |  |
| TSG Chair |  |  |
| ERG Technical Staff |  |  |

**Form Date 3/29/2023**