# REGION 3 BEHAVIORAL HEALTH BOARD

# PRESENTATION REQUEST

Date: _____ Contact Name: _____

Organization: _____

Presentation Topic: _____

Presenter Name: _____

Time needed for Presentation: _____

Dates available for presenting: _____

Do you have a power point presentation? ☐ Yes ☐ No

If yes, please email with this presenter request.

Describe what you will presenting to the R3BHB? What outcome do you expect from the board?

Describe how your presentation/agency's work relates to R3BHB? What outcome do you expect from the board?

Thank your interest in applying for a presentation request at the Regional 3 Behavioral Health Board. While we appreciate community information, we are a legislative appointed working board. We ask that you limit your presentation time accordingly.

**Please submit form to:** mmezo@trhs.org

December 2023