|  |  |  |
| --- | --- | --- |
|  |  |  |

**Co-developed Learning Activity Sessions**

|  |  |
| --- | --- |
|  |  |
| Organization |       |
| Contact name |       | Position |       |
| Address |       | City  |       |
| Province/Territory |       | Postal code  |       |
| E-mail |       | Telephone |       |
| Session notes  |       |
|  |

**Detailed Proposal**

|  |
| --- |
| All proposals must be submitted to **secretariat@cic-cci.ca**and received by**17:00 (ET) on Thursday 19 August 2021** |
| **Preferred date**  | [ ]  Wednesday 8 December  | [ ]  Thursday 9 December  |
| **Preferred time** | [ ]  10:30-11:25 [ ]  16:50-17:45 | [ ]  10:30-11:25 [ ]  16:35-17:30 |
| **Prescribing demographic** | [ ]  Paediatric  | [ ]  Adult |   |
| **Proposed title** |       |
| **Session description** (maximum 150 words) |       |
| **Learning objectives**At the end of this session, participants will be able to |                 |
| **Learning needs** Describe how the learning needs of the target audience determined |       |
| **Proposed faculty** List up to three proposed faculty and their affiliations |                 |
| **Proposed faculty contact** Indicate the e-mail/phone for the proposed faculty | E-mail |       | Phone |       |
| E-mail |       | Phone |       |
| E-mail |       | Phone |       |