



Application to Participate in a Virtual Professional Group (VPG)

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|-------------------------------|--|
| Applicant Name | |
| Discipline | |
| College | |
| Address | |
| Home or Cell Phone# | |
| College e-mail Address | |

The VPG meetings will be in October, November, January, February, and March.

Please indicate your preference for the VPG meetings from **7:00-9:00pm, EST**:

| | | |
|------------------|------------------------------|-----------------------------|
| Monday | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Tuesday | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Wednesday | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Thursday | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Send to: tsypris@kvcc.edu (Theo Sypris, Director of Midwest Institute for IIE)