**NAME OF EVENT LOREM IPSUM DOLOR SIT AMET**

EVENT PROGRAM

**Day, Month 00, 2015**

# 0:00 pm

*Reception*

# 0:00 pm

*Recognition Ceremony*

# Speaker One

Job Title Or Position Description, Name Of Department

# Speaker Two

Job Title Or Position Description, Name Of Department

# Speaker Three

Job Title Or Position Description, Name Of Department

# Speaker Four

Job Title Or Position Description, Name Of Department

*Presentation of (Name of Award) by Name of Person*

**Guest of Honor or Speaker**

**Thank you for joining us to celebrate (EVENT NAME) at the University of Washington.**



