**CONFERENCE WORKSHOP PROPOSAL FORM**

Please refer to the **Conference Workshop Proposal Instructions** for additional details on completing and submitting this form.

|  |  |
| --- | --- |
| Title of Workshop | Click here to enter text. |
|  |  |
| Primary Presenter Name | Click here to enter text. |
|  |  |
| Email:  | Click here to enter text. |
|  |  |
| Phone: | Click here to enter text. |

**Topic Area (Designate 1st and 2nd choice below using the drop down menus to the left of each topic area)**

Please classify the scope and content of your session into one of the following topic areas. Refer to the Conference Workshop Proposal Instructions for more information and guidance.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| -- | ACT | Access and Communication Technology |  | -- | NEW | New and Emerging Technology |
| -- | COG | Cognition and Sensory Impairments | -- | OUT | Service Delivery and Outcomes |
| -- | INT | Internationally Appropriate Technology | -- | PP | Public Policy and Advocacy |
| -- | JEA | Job and Environmental Accommodation  | -- | SM | Seating and Mobility (Incl. CRT) |
| -- | OTH | Other (Please describe): Click or tap here to enter text. |

**Presentation Type and Previous Presentations** (Click the word “choose” to display a drop-down box)

Choose. Is this a SIG/PSG generated workshop/symposium approved by the SIG/PSG Chair?

 If yes, please indicated SIG/PSG Name: Click here to enter text.

Choose. Is this an RERC generated workshop/symposium?

 If yes, please indicate RERC Name: Click here to enter text.

Choose. Have you or someone else presented this workshop/symposium in the last five (5) years?

If yes, please indicate when and where: Click here to enter text.

## **Professional Level of Presentation** (Check only one):

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  | Beginner (0-2 yrs. experience) | [ ]  | Intermediate (2-5 yrs. experience) |
| [ ]  | Advanced (5+ yrs. experience) | [ ]  | All Levels |

**Style of Presentation** (please provide only one answer for each of the following questions):

|  |  |
| --- | --- |
|  |  |
| Is this a one (1) or two (2) hour workshop proposal?*Session length is subject to approval by the conference committee.*  | Choose an item. |
|  |  |
| How many presenters will be participating?*Symposia must include a minimum of three presenters.*  | Click or tap here to enter text. |
|  |  |
| Does your session include significant interactive content and/or discussion? *Note: All sessions must include at least 15 minutes for questions and/or discussion.* | Choose an item. |
|  |  |
| Does your session include a demonstration or hands-on experience with technology?  | Choose an item. |
|  |  |
| Is this a Professional Show & Tell or an Audience-Driven session?*Note: Professional Show & Tells must be SIG-Generated sessions.*  | Choose an item. |
|  |  |
| Does your session require the computer lab?  | Choose an item. |

**Please complete your proposal on the next page.**

Proposals **MUST** include all of the below items and follow the format below. (See **Workshop Proposal Instructions** for detailed description of required areas.) The program committee reserves the right to change or edit the title and abstract for clarity and marketing purposes.

1. **Abstract (75-100 words)** NOTE: Please do not exceed 100 words. Text box will expand to fit.

|  |
| --- |
| Click here to enter text. |

1. **Relevance to Conference Audience (50-75 words)** NOTE: This text may be used to supplement the abstract; please do not simply restate what is in the abstract. Text box will expand to fit.

|  |
| --- |
| Click here to enter text. |

1. **Learning Outcomes (Minimum of three required)** NOTE: For CEU purposes, these must be quantifiable and should use active verbs. Ex: “Participants will be able to identify four obstacles to the successful use of seating technologies.” vs. “Participants will discuss the obstacles…” See **Workshop Proposal Instructions** for more details.

|  |  |
| --- | --- |
| 1 | Click here to enter text. |
| 2 | Click here to enter text. |
| 3 | Click here to enter text. |
| 4 | Click here to enter text. |
| 5 | Click here to enter text. |

1. **Proposed Handout Materials** NOTE: Handouts must be submitted by June 30, 2018 to be posted on the website in advance of the conference. ***Handout materials are required for all presentations.***

|  |
| --- |
| Click here to describe proposed handout materials. |

1. **Organizational Structure of Session**

|  |  |  |  |
| --- | --- | --- | --- |
| Time in Minutes  | Learning Outcomes to be Addressed | Presenter(s) | Instructional Design: Presentation format, Activities Planned, AV used |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| 15 min (Required) | Discussion Period (Required Min) | Click here to enter text. | Click here to enter text. |

## **Presenter Experience** (50-100 words)

Please provide a brief description of presenters’ experience with this topic area and with presenting at trainings or conferences. If there are multiple presenters, please provide no more than 50 words per presenter.

|  |
| --- |
| Click here to enter text. |

1. **Presenter Contact Information**

**Primary Presenter:** This person will be responsible for coordinating the session, scheduling the sequence of presenters, communicating with the other presenters/participants prior to presentation date and will serve as primary contact.

**Name:** Click here to enter text.

**Title:** Click here to enter text.

**Affiliation/Company:** Click here to enter text.

**Address:** Click here to enter text.

Click here to enter text.

Click here to enter text.

**Phone (Day Time):** Click here to enter text.

**Email:** Click here to enter text.

**Co-Presenters:** Please provide the following information for all co-presenters

**Name:** Click here to enter text.

**Title:** Click here to enter text.

**Affiliation/Company:** Click here to enter text.

**Email:** Click here to enter text.

**Name:** Click here to enter text.

**Title:** Click here to enter text.

**Affiliation/Company:** Click here to enter text.

**Email:** Click here to enter text.

**Name:** Click here to enter text.

**Title:** Click here to enter text.

**Affiliation/Company:** Click here to enter text.

**Email:** Click here to enter text.

1. **Presenter Agreement**
	1. Presenter will disclose any financial or non-financial interest in any product, instrument, device, service, or material discussed during their presentation and the source of any compensation prior to the start of his or her presentation.
	2. Presenter is compliant with copyright laws and has ownership or permission to use all materials used in conjunction with the presentation.
	3. Presenter will demonstrate high standards of professional conduct and not discriminate against learners on the basis of gender, age, socioeconomic or ethnic background, sexual orientation, or disability.

## **ONLINE SUBMISSION**

Proposals must be received online on or before Friday, December 1 at 11:59 p.m. ET. Upload the completed Workshop Proposal Form to the online submission system. **Please review the Workshop Proposal Instructions in advance of the deadline and prior to submitting your proposal**. Go to <http://cmt3.research.microsoft.com/RESNA2018> to submit your proposal.

Once you’ve submitted your proposal, you will have the option to send yourself a confirmation email message from the “Submission Successfully Saved” screen. This is the only confirmation message you will receive, as the system does not automatically send one.

If you have problems submitting your proposal, please contact the RESNA office at conference@resna.org with subject line Workshop Proposal 2018.

For general questions about the workshop program, please contact John Anschutz, the 2018 Program Chair, at john\_anschutz@shepherd.org.