

# NYSADSA 2019 Annual Conference November 14, 2019 – Doubletree Hilton, Tarrytown, NY

# **Call for Presentations**

You are invited to submit a proposal to share your experience and expertise with NYSADSA members and the NYS Aging Community at the 2019 NYSADSA Annual Conference. Others will benefit from your experience while you make a valuable contribution to the profession's field of knowledge.

Presentation submissions must be received no later than August 9, 2019. Please submit the completed form to the NYSADSA State Office at <a href="mailto:nysadsa@caphill.com">nysadsa@caphill.com</a>

### **INSTRUCTIONS FOR SUBMITTING A PROPOSAL:**

- Complete the attached Call for Presentations form.
  - o Submissions must be typed or reproduced on a computer in the exact order
  - There is also an online submission form to submit HERE
- Review for completeness, accuracy and legibility; sign and date form.
- Submit the completed form no later than Friday, August 9, 2019. Please submit your completed form to the NYSADSA State Office at <a href="mailto:nysadsa@caphill.com">nysadsa@caphill.com</a>.
- Notification on the status of submission will be e-mailed directly to the proposing speaker no later than September 6, 2019.

#### **PROPOSAL REVIEW**

Members of the Selection Committee will review all complete proposals. Final selections will be made by the conference program organizers from those proposals accepted.

#### A NOTE CONCERNING HONORARIA

The NYSADSA Annual Conference has a tradition of using educational conference sessions as a platform for innovation in the adult day services field and aging community. We look for contributors who are willing to share their expertise without expectation of payment in the spirit of networking, a purpose for which NYSADSA supports to being the aging community together. If you are seeking some form of payment for your speaking services, you must indicate that in the appropriate section of the form.

**EACH CONCURRENT SESSION WILL LAST 50 MINUTES.** 

**The Selection Process.** We strive to offer a balanced program of educational sessions by selecting proposals that best fit within the framework of the conference.

**Practical Application.** Sessions conducted by individuals that include practical, immediately applicable work tools and knowledge will be given preference. The conference committee seeks presentations that will provide our attendees with information that will improve their effectiveness as a professional.

**Proven Speaking Ability.** The conference committee seeks experienced presenters with proven speaking ability.

### We expect presenters to:

- Meet all deadlines;
- Retain the session content, audio/visual needs as originally submitted;
- Not add a co-presenter or change the identity or number of presenters without permission;
- Provide high-quality handouts by the date and in the format requested;
- Honor our commitment to provide education by not showcasing or promoting the speaker's practice, services, or products, and
- Respect the NYSADSA Annual Conference as the sponsoring organization with either positive or neutral comments from the platform.

## In return, we will:

- Provide a complimentary registration for the conference, including admission to education programs and social events.
- Pay pre-determined, pre-approved expenses.
- Grant you valuable professional exposure.
- Provide you with you revaluation scores after the conference.

# CALL FOR PRESENTATIONS APPLICATION for the **NYSADSA 2019 Annual Conference**

All information must be typed and submitted either on this form or in this exact order. Submit your name as you wish to see it published. Please include your professional designation after your last name

(if applicable). We will allow one proposal per person. Please list your name, job title, company/organization and address below: Name:

Professional Designation:		
Job Title:		
Company/Organization:		
Address:		
City, State, Zip:		
Phone Number:		
Fax Number:		
E-mail Address (REQUIRED):		
Will you have a co-presenter?	YES	NO
If yes, please duplicate this form for your co-pre	senter and attach the com	npleted form with your ow

n submission.

If necessary, please state required honorarium:

Please list an estimated total of additional expenses you will incur and submit for reimbursement:

#### TITLE OF SESSION:

### **SUMMARY OF SESSION:**

In 75 words or less, provide a summary of the content. If you are selected to present, the description submitted below will be used in promotional material and on the conference website. Please Note: We may change and/or reduce your title/description for program clarity.

<b>LEARNING OBJECTIVE:</b> Provide a one-sentence primary learning objective of your presentation. Please do not give bullet points, multiple objectives joined by semi-colons, or several sentences. Here is an example: This session will help you prepare for changes in the profession by examining and discussing emerging issues in aging and their affect on day-to-day Adult Day Provider responsibilities.
BIOGRAPHICAL SKETCH: In 75-100 words or less, provide a sketch of your background and professional experience—showing your qualifications to present on your subject area. If you are selected to present, the description submitted below will be used in promotional material and on the conference website.
<b>HEADSHOT:</b> Please attach a headshot to your e-mail in submitting this proposal. The headshot should be high quality and in a .jpg or .png file.
By signing this proposal and if selected, I agree to adhere to the deadline schedule furnished by conference organizers. I understand that my conference presentation is not a showcase for promotion of my business, practice or product, and I will not sell my products or services from the NYSADSA speaker platform. I also understand that I will be notified about the status of my proposal by September 6, 2019.

Date

Signature