5th Annual Substance Abuse Prevention Conference
Strengthening Our Community:
Creating Healthy Solutions

Presentation Proposal Form

Type of Presentation (select one):
◯ Oral Presentation (approx. 75 min) ◯ Poster Presentation

Name of Agency/Organization: _____

Name/of Primary Presenter: _____
*Attach a brief bio sketch with photo and a current resume or curriculum vitae for each presenter.

Title: _____ **Degree:** _____

Email: _____
*Proposal confirmation and acceptance status will be sent to this email address.

Work Phone: _____ **Cell Phone:** _____

Mailing Address: _____

Name/of Secondary Presenter: _____
*Attach a brief bio sketch with photo and a current resume or curriculum vitae for each presenter.

Title: _____ **Degree:** _____

Email: _____

Work Phone: _____ **Cell Phone:** _____

Mailing Address: _____

Breakout Session Title: _____

Program Track: ◯ Community Connectedness ◯ Health Care Quality and Integration
◯ Workplace Health/Organizational Learning

Session Summary: Please attach a presentation overview of 100 words or less. This overview may be printed in the conference program and posted on the conference website.

Please identify at least 3 learning objectives that your session will cover.

1. _____
2. _____
3. _____

Are you using a digital presentation and/or handout?

◯ Yes ◯ No

If yes, may we post your presentation materials to the conference website?

◯ Yes ◯ No

How will presentation materials be made available to registered participants?

You can select both options.

☐ I (presenter) will bring copies of materials. ☐ Materials posted on conference website.

Please describe your A/V needs below.

Presenters must provide their own laptop. Apple computers may require additional cords.

☐ LCD Projector and Screen
☐ Wi-Fi access
☐ Other (please specify) _____
☐ I do not require any A/V equipment.

If you have questions regarding this Call for Presentations, please contact Monica Rousseau via email at mrousseau@pascoasap.com.

Deadline for proposal submission is January 29th at 5:00pm.