

2010 OHIO REHABILITATION ASSOCIATION ANNUAL TRAINING SEMINAR EMBASSY SUITES COLUMBUS AIRPORT HOTEL, COLUMBUS, OHIO OCTOBER 6-7, 2010

CALL FOR PRESENTATION PROPOSAL INSTRUCTIONS

PLEASE COMPLETE THE CALL FOR PRESENTATION PROPOSAL FORM CLEARLY AND IN ITS ENTIRETY.

ALL DOCUMENTS MUST BE SUBMITTED BY JUNE 1, 2010 TO JOSEPH KEFERL AT: JOSEPH.KEFERL@GMAIL.COM

PRESENTATION SPECIFICS: Rooms will be set up in classroom style with tables and chairs. Rooms will have a LCD projector, screen and Internet access. Presenters must provide their own laptop computer, if applicable.

Your Audience and Approval of Continuing Education CREDITS: Your presentation will be submitted to multiple certifying Boards for approval of continuing education (CE) credits (with specific focus areas identified per the CE applications). These Boards include but are not limited to: Certified Rehabilitation Counselor (CRC), Certified Disability Management Specialists (CDMS), Certified Case Managers (CCM), Certified Vocational Evaluation Specialists (CVEs), Social Workers (LSW/LISWs are mental health professionals licensed by the State of Ohio who are trained to help individuals, groups, families and organizations deal with emotional problems and help resolve conflicts or problems relating to others at home, at work, in school, etc.), Professional Counselors (PC/PCCs are mental health professionals with a master's or doctoral degree, licensed by the State of Ohio, who are trained to help individuals, families, and organizations to optimize healthy functioning and prevent or remediate mental, emotional, or behavioral problems) and the Ohio Department of Developmental Disabilities (Adult Services).

TITLE OF PRESENTATION: The title of the presentation must be ten (10) words or less. The title must be specific to the content and if including ethics, the word ETHICS must be in the title.

ABSTRACT/SUMMARY OF SESSION: The abstract is a summary about your presentation. It is recommended that you include information about your objectives and content. The abstract is also utilized for program selection and certification purposes and must be descriptive of your session content. The abstract should be limited to 75 words or less. The abstract will be published in seminar publications and will be utilized by the seminar participants to help select sessions to attend.

NOTE ON ETHICS PRESENTATIONS: When giving a presentation on ethics, the CRC/CRCC <u>and</u> CDMS *Code of Professional Ethics* must be referenced and properly cited within the presentation (*cannot be just a handout*) and the word "ethics" must also be included in the title.

PROGRAM OBJECTIVES: These must be stated in behavioral terms with a minimum of three Objectives (Example: 1 - Identify the problem; 2 - Define potential new approach; and 3 - Develop strategies to implement).

PRESENTER INFORMATION

WE WANT TO EXPRESS OUR APPRECIATION OF YOUR TIME TO COMPLETE THESE FORMS ALONG WITH SUBMITTING A ONE PAGE VITAE OR BIO ON EACH PRESENTER (WHICH OUTLINES EDUCATION, CREDENTIALS, WORK EXPERIENCE AND/OR EXPERTISE IN THE AREA OF THE PRESENTATION). AGAIN, EACH PRESENTER MUST PROVIDE BOTH OF THESE DOCUMENTS AS REQUIRED FOR APPROVAL OF CONTINUING EDUCATION CREDITS.

CONTACT INFORMATION FORM

<u>Presenter Identification</u>: Each presenter should provide their name as it is to be published. In addition, you should list your degree such as BA, MA, etc. and the field of study your degree is in, e.g. Rehabilitation Counseling, Education, Social Work, etc. as well as your credentials, certifications, or licensures.

Address/Telephone/Email Address: Please be sure to complete all of these areas. An email address is required.

Accommodations: Please indicate if you require any specific accommodations, e.g., an interpreter.

<u>Presenter Benefits</u>: Presenters can attend the seminar at no cost and receive CEUs if applicable.

<u>Vested Interests</u>: Having an interest in an organization does not prevent a presenter from making a presentation, but the audience must be informed of this relationship prior to the start of the activity. (If the Presenter already has special forms to identify this, please include a copy of the completed forms declaring vested interest.)

QUESTIONS

Please contact Joseph Keferl, Program Committee Chair, at: JOSEPH.KEFERL@GMAIL.COM or (937) 371-2842

THANK YOU FOR YOUR SUBMISSION!