



51st Annual Midwest School Social Work Fall Conference and Council Meeting

Call for Workshop Proposals

Inspire. Motivate. Engage. Lead.

October 17-20, 2018 | Clayton, Missouri

Title of Workshop: _____

Attach a presenter(s) resume(s) and workshop description of not more than 100 words that can be used as an abstract for the conference brochure as well as three goals and learning objectives. Presentations that feature evidence based practice, contemporary educational frameworks, or direct practice based are particularly desirable. Please note the number of breakout workshops is limited.

Brief Description of Workshop: _____

Check all that apply:

- Length of Workshop 1.5 hours 3 hours Other: _____
- Target Audience Mental Health Spec. School Leaders Other School Personnel
- School Level Early Childhood Elementary Middle School High School
- Practice Level Beginning Experienced Clinical Case Management
- Presentation Style Lecture Panel Experiential
- Days You Can Present Wed, 10/17/18 Thurs, 10/18/18 Friday, 10/19/2018
- Prior Experience Never presented Lecture Panel

Please describe, indicate for whom and when: _____

- Anticipated A/V equipment needs (if any): Laptop Projector Internet
- Will participants earn a certificate or specialization from this workshop? Yes No
- Will you attend the rest of the conference? Yes No

**Please plan to bring copies of handout(s) and/or presentation slides. Speakers are welcome to attend any other speakers/keynotes and get CEU's for FREE. They will be given a discount code for free registration. *You must register for the conference to receive/participate in Conference activities. Resume and/or vitae required from all presenters.*

Primary Presenter: _____ Degree/Credentials: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____ Cell: _____

Email: _____

Employer: _____ Position: _____

Additional Presenter: _____ Degree/Credentials: _____

Email: _____ Position/Title: _____

Additional Presenter: _____ Degree/Credentials: _____

Email: _____ Position/Title: _____

PROPOSAL DEADLINE: MAY 1, 2018

Submit all requested items to: Kim Harrelson at sswam@sswam.org or 10 Berry Hill Ct, St. Charles, MO 63303

SSWAM is unable to pay for conference presentations. Thank you for your interest, notification of selection will be distributed by April 30, 2018.