



2019 PENNSYLVANIA MENTAL HEALTH & WELLNESS CONFERENCE

May 20-21, 2019 | Harrisburg, PA

WORKSHOP PROPOSALS

DEADLINE FOR SUBMISSION IS FRIDAY, NOVEMBER 30, 2018

Workshop Title _____

Note: The primary presenter will receive all correspondence and will be responsible for communicating all information to co-presenters.

(*Req)

***WORKSHOP DESCRIPTION:** Brief workshop description that is to be printed in the conference brochure (50-75 words maximum). Workshops are 75 minutes total, should include 5-10 mins for Q&A.

*** TARGET AUDIENCE:** Mental Health Professional Family Member/Caregiver Individual in Recovery

*** TECHNICAL LEVEL:**

- Basic - suited for everyone regardless of experience, knowledge, or education
- Intermediate - suited for individuals with some relevant experience, training, or education
- Advanced - suited for professionals with more extensive experience, training, or education

***EDUCATION OBJECTIVES:** List 3 learning objectives. Objectives should be specific, action oriented and also measurable and observable. Objectives that state a specific skill or improve the participant's skills in a specific area are acceptable.

1. _____

2. _____

3. _____

***Please attach a workshop outline or abstract with proposal.**

PRESENTER INFORMATION

Presenter #1 (*Req)

*First Name _____ *Last Name _____

*Title/Credentials _____

*Agency/Organization Affiliation _____

*Email (confirmation will be sent to this email) _____

*Address _____

*Phone: _____ Fax: _____

Presenter 1 BIO: *2-3 sentence bio for presenter. Bio provided will be used in the conference brochure.

Attachments:

- Presenter # 1: Photo of Presenter (*JPEG/Full Color Preferred*)
- ***Presenter # 1:** Please attach resume/CV with proposal

Presenter #2 if applicable

*First Name _____ *Last Name _____

*Title/Credentials _____

*Agency/Organization Affiliation _____

*Email (confirmation will be sent to this email) _____

*Address _____

*Phone: _____ Fax: _____

Presenter 2 BIO: *2-3 sentence bio for presenter. Bio provided will be used in the conference brochure.

Additional Attachments:

- ***Presenter # 2:** Attach resume/CV with proposal.
- **Presenter #2:** Photo of Presenter (*JPEG/Full Color Preferred*)

Deadline for submission is FRIDAY, NOVEMBER 30, 2018

NAMI Keystone Pennsylvania
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If you have any questions, please contact Susan Caban at 1-888-264-7972 or email scaban@namikeystonepa.org. **Presenters will be contacted via email by December 10, 2018.**