**Call for Proposals**

**Breakout and Poster Sessions Submission Form**

**2019 Midwest Symposium for Leadership in Behavior Disorders**

**Symposium Dates**: February 21, 22, 23, 2019

**Location:** Sheraton Kansas City Hotel at Crown Center, Kansas City, Missouri

**Presentation Date:** Friday, February 22, 2019

 Breakout Sessions various from 10:20 AM – 4:15 PM

 Poster Session: 4:15 – 6:00 PM

**Mission Statement:** The Midwest Symposium for Leadership in Behavior Disorders fosters professional and family leadership that improves the lives of children and youth with emotional/behavioral disorders or related behavioral challenges.

**TYPE OF SUBMISSION**

**Breakout Proposals Due:** June 15, 2018 at 11:59 p.m. central time zone

☐ I’m submitting my proposal to be reviewed for a Breakout Session

☐ If my proposal is not selected for a Breakout Session, I’m willing to allow it to be reviewed a second time for the Poster Session.

**Poster Proposals Due:** August 15, 2018 at 11:59 p.m. central time zone

☐ I’m submitting my proposal to be reviewed for the Poster Session

**CONTACT INFORMATION OF INDIVIDUAL SUBMITTING THIS PROPOSAL**

|  |  |
| --- | --- |
| First Name  |  |
| Last Name  |  |
| E-mail Address |  |
| Phone Number  |  |
| Affiliation |  |
| Street Address 1  |  |
| Street Address 2 |  |
| City |  |
| State |  |
| Postal Code / Zip Code  |  |
| First Name  |  |
| Last Name  |  |

**TITLE AND ABSTRACT**

**Title of Session** (Limit of 12 words or less ideal, 20 words maximum)

**Brief Abstract/Description of Session** (please keep as brief as possible for the program, 3-6 sentences maximum. MSLBD reserves the right to edit descriptions to fit the space allowed in the program.)

**PRESENTATION DETAILS**

**Audience**: Participants are primarily teachers and related services staff.

|  |  |
| --- | --- |
| Please select one | **Identify Level of the Proposed Session** |
|  | Basic/Introductory |
|  | Intermediate |
|  | Advanced as a breakout presentation. |

**OFFER YOUR SESSION FOR BCBA CEUs**

Are you, or a co-presenter for the proposed presentation a Board Certified Behavior Analyst (BCBA)? (Breakout Sessions Only)

☐ Yes

If one or more presenters are BCBAs, and if approved would you like this presentation to be considered for BCBA continuing education credit?

☐ Yes

Sessions that offer BCBA CEUs must provide content that goes beyond what is required under the current BCBA Task List and be consistent with the BCBA Guidelines for Responsible Conduct. The session can address any aspect of behavior-analytic practice, science, methodology, and theory. Offering your session for BCBA CEUs does not require additional responsibilities and provides a needed service to BCBAs wishing to maintain certification.

**General Session Submission or Session Identified for a Breakout Strand**

|  |  |
| --- | --- |
|  | General Submission  |
|  | Keynote Strand |
|  | Master Teacher Strand |
|  | Academic Strand |
|  | Behavioral Strand |

**List the outcomes for the proposed session**:

**Detailed Proposal Description**

Presentation Description

***Attach a Word or PDF file****. Describe in more detail the nature of the presentation and how it would benefit the audience including how the session topic is grounded in research-based practice. No more than 2-3 single spaced pages including references. All presentations must be aligned to research-based practices and referenced.*

**Audience**

|  |  |
| --- | --- |
| Please select all that apply | **Indicate the Intended Audience** |
|  | Early Childhood |
|  | Elementary |
|  | Secondary |
|  | Special Education Teacher |
|  | Paraprofessional |
|  | Special Education Director |
|  | General Education Teacher |
|  | General Education Administrator |
|  | Families |
|  | School Child Study Team Members |
|  | Other |

**PRESENTER INFORMATION**

**Provide the following Information for the Program Listing**

First & Last Name, Degree, Institution, City, State. List in the order for the program.

Example of Listing: *Reece Peterson, PhD, Elisabeth J. Kane, MA University of Nebraska-Lincoln, Lincoln, NE; Michael Couvillon, PhD, Drake University, Des Moines, IA; Joseph B. Ryan, PhD, Clemson University, Clemson, SC*

**Contact Information for each presenter**

|  |  |  |
| --- | --- | --- |
| **First Name** | **Last Name** | **email address** |
| 1.  |  |  |
| 2.  |  |  |
| 3.  |  |  |
| 4.  |  |  |
| 5.  |  |  |

**Additional Information for the review committee or the symposium manager**:

**FORM REVIEW**

It is the policy of the Midwest Symposium for Leadership in Behavior Disorders that sessions included in the Symposium program are not to be used for marketing commercially and/or individually produced materials for sale. Tables are available for display of such materials in the exhibit space outside of the meeting rooms; we encourage the use of the exhibit space for sales purposes.

☐ Yes, I have reviewed my proposal and agree that it aligns with the MSLBD Symposium goals and is not a promotion of commercially or individually produced material.

**Submit to:**

Midwest Symposium for Leadership in Behavior Disorders

PO Box 202

Hickman, NE 68372

Email: Keri Frey, MSLBD Manager | manager@mslbd.org

**REMINDERS TO THE PRESENTERS**

* Only the first presenter will be informed about the acceptance status of the presentation.
* One complimentary registration will be provided per presentation - to the first presenter unless otherwise indicated. No travel reimbursement or honorarium will be provided.
* All presenters must register to attend the Symposium. Only those registered by January 10 will be listed in the program.
* Breakout Notifications: July 15-20; Poster Notification: September 10-15