Call for Proposals

NCOTA Fall Conference 2020

*“Navigating New Horizons”*

October 2-4, 2020

# New Bern Riverfront Convention Center

**New Bern, NC**

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**North Carolina Occupational Therapy Association**

 **PO Box 20432, Raleigh, NC 27619-0432**

**NCOTAConference@gmail.com**

[www.ncota.org](http://www.ncota.org)

**919-785-9700**

**Proposal Due Date: June 1, 2020**

Call for Proposals - NCOTA Fall Conference 2020

# Pre-Conference Institutes on Friday, October 2, 2020

# Full Conference on Saturday – Sunday, October 3-4, 2020

# Submission Deadline – June 1, 2020

**SPEAKER INFORMATION:**

The **primary speaker** is the only person to whom NCOTA will send subsequent communication regarding acceptance of the proposal and onsite logistics. Communications will be sent via email. Any change in email address should be reported promptly to **NCOTAConference@gmail.com** to ensure that communication between NCOTA and the primary speaker is uninterrupted.

Please complete electronically (fields expand to allow space to complete) and submit via email to **NCOTAConference@gmail.com**

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| --- |
| **Primary Speaker** |
| Name andCredentials |  |
| Affiliation or employer |  |
| Mailing Address |  |
| Preferred Phone |  |
| Mobile Phone  |  |
| E-Mail |  |
| NCOTA member? |  | Yes |  | No  |  |
| **Additional Speaker(s)** |
| Name and Credentials |  |
| Affiliation or employer |  |
| Mailing Address |  |
| Preferred Phone  |  |
| E-Mail |  |
| NCOTA member? |  | Yes |  | No  |  |

**Session Title** (No more than 10 words, should **clearly convey content or topic**):

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|  |

**Session Type**:

|  |  |  |  |
| --- | --- | --- | --- |
| **Preference**: | **Type** | **Time** | **Day** |
|  | Short Course  | 1.5 hours | Saturday Sunday |
|  | Pre-Conference Institute | 4 hours | Friday Only |

**Focus** **Area:** Check one area. If more than one applies, indicate 1st and 2nd choices.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Pediatrics (including school-based practice) |  | Home and Community Health  |
|  | Assistive Technology  |  | Mental Health  |
|  | Education/Research/Fieldwork |  | Administration and Management |
|  | Physical Disabilities  |  | Geriatrics |
|  | General |  | Student Focused |

**Session Synopsis** : (No more than 125 words) Summarize the **major points** of your presentation and **describe** how this topic will advance either the practice/professional development of the participant or the field of occupational therapy. If your proposal is accepted, the synopsis will be posted in the online conference program which attendees will use to select their session choices. The synopsis will also be published in the onsite conference program.

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**Presenter Bio:** Please include a brief bio for the presenters which will be published on the NCOTA website with the conference materials. Include the most pertinent information as it relates to your presentation.

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| --- |
| Primary Speaker: |
| Additional Speaker:  |
| Additional Speaker: |

**Level of Presentation:** Check all that pertain

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| --- | --- | --- | --- | --- | --- |
|  | Novice/Entry Level |  | Intermediate |  | Advanced |

**Target Audience:** Check all that pertain

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| --- | --- | --- | --- |
|  | OT  |  | Educator/Fieldwork Educator |
|  | OTA |  | Student |

**Learning Objectives/Content/Methods**

**Session Title:**

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| --- |
|  |

**Session Type (see previous page):**

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**Short Courses must have 2 objectives. Pre-Conference Institutes must have 3 – 4 objectives.**

Objectives are measurable and achievable. Words such as describe, explain, identify, design and apply are measurable objectives for what a participant should be able to do after attending the session.

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| --- | --- | --- | --- | --- |
| **LEARNING OBJECTIVES** | **CONTENT (TOPICS)** | **TIME FRAME** | **PRESENTERS** | **TEACHING****METHODS** |
| **List Objectives In Operational/Behavioral Terms** | **List Each Topic Area to be Covered and Provide a Description or Outline of the Content to be Presented***Note Whether The Content Is Descriptive, Research, or Practice-Focused* | **State the Time Frame for the Topic Area.** | **List the Faculty Person or Presenter for Each Topic** | **Describe the Teaching Methods Used for Each** |
| **Objective 1** |  |  |  |  |
| **Objective 2** |  |  |  |  |
| **Objective 3** |  |  |  |  |
| **Interactive Component**(encouraged but not required)Examples:Breakout groupSimple gamesHands-on/kinesthetic learningTechnology (Kahout, Socrative) |  |

# (Note- You can add, delete, and expand, contract row as needed for the number of topics and length of objectives.)

**In addition to any presentation materials, speakers will need to provide attendees with access to an outline of the presentation, at a minimum. Speakers should send a digital copy of either a handout, presentation, or any other materials at least ONE WEEK PRIOR to Conference to be added to the website. Speakers are responsible for printing handouts to give to attendees if they choose not to post handouts online. This is to provide justification for continuing education credit if a practitioner is audited.**

**AV Equipment and Room Set Up Request:**

The standard AV setup is built into each room. Bring your presentation on a flash drive and as a backup, NCOTA recommends that you email yourself a copy.

Please check as appropriate:

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| --- | --- |
|  | I **will** need access to a computer, projector, and screen.  |
|  | I **will not** need access to a computer, projector, or screen.  |
|  | I will be bringing other equipment for demonstration purposes and need space in the front of the room. |
|  | This session is a panel and requires a speakers’ table at the front. |

**Conflict of Interest:**

No promotion of or sale of goods, services, or products is permitted during educational sessions. Any session where this occurs will be halted. NCOTA recognizes that a speaker may have a financial interest in products or services discussed during an educational session. Such an interest is not prohibited, but it must be disclosed. Please check the appropriate statement. If a financial interest exists, it must be described below.

|  |  |
| --- | --- |
|  | No speaker has a financial interest in products or services to be discussed in the proposed program. |
|  | The following speakers have a financial interest in products or services to be discussed in the proposed product: |

**Please Read Carefully:**

* **I/we understand the AV options available and understand/agree to abide by the policies governing accepted proposals.**
* **I/we understand the requirement that all OT, OTA and student speakers must register for the conference.**
* **In addition to any presentation materials, speakers will need to provide attendees with access to an outline of the presentation, at a minimum. Handouts can be distributed at the time of the presentation. This is to provide justification for continuing education credit if a practitioner is audited.**

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| **Primary Presenter Name & “agree” will be considered evidence of agreement to terms:** |  |
| **Date submitted:** |  |