

## Workshop Submission Form

Complete the requested information and submit.

***Deadline for Submission: February 19, 2021***

### Principal Presenter

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Organization/Agency: \_\_\_\_\_

Agency Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Additional Presenters

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Organization/Agency: \_\_\_\_\_

Agency Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Proposal Information

**Workshop Session Title:** (45 characters or less)

Enter a brief title that clearly reflects your proposed workshop's content as you would like it to appear in the conference program.

**Brief Workshop Session Description:** (100 characters or less)

Please provide a brief description of your session. This description will be used in the Summit program to provide participants with a snapshot of your session.

**Detailed Workshop Session Description:** (500 characters or less)

Provide a detailed description of your proposed session. This description will be used on the website to provide participants with detailed information about your session.

The following elements should be included:

Topic to be addressed.

Purpose of session.

Description of what participants will do, hear, and see in your session.

Description of what participants can expect to take away from your session.

**Select the Intended Track** (select all that apply):

Housing

Employment

Youth

Working with Diverse Populations

Working with Clients with Serious Mental Illness and/or Substance Use Disorders

**Profile of Each Presenter:**

Enter a brief, biographical summary (not to exceed 350 words) of each presenter.

This brief, biographical sketch should include present position, degrees earned, and training/teaching experience.