**North American Society of Adlerian Psychology**

**PRESENTATION PROPOSAL FORM**

**NASAP 2020 – Atlanta, GA**

**May 28 – May 31, 2020 - Submission Deadline is October 1, 2019**

*PLEASE NOTE THAT* ***ALL PRESENTERS NEED TO REGISTER FOR THE TWO-DAY CONFERENCE****. IF YOU DO NOT WANT TO DO THAT, PLEASE DO NOT SUBMIT A PROPOSAL. SELECTION PREFERENCE WILL BE GIVEN TO MEMBERS OF NASAP.*

***Only TWO presentations will be considered with the same person as the First Presenter. Only three presentations will be considered total from any presenter, including as second or subsequent presenter.***

***This is designed as a FORM to fill in the blank spaces only. Just use your TAB key (or mouse) to go from blank space to blank space and type. The blank will expand as needed.***

**PRESENTATIONS**

Name of Presenter       Presenter’s Email

Name of Co-Presenters

Title of Presentation

[ ]  90 minute slot (for demo’s only) [ ]  75 minute slot [ ]  60 minute slot

\*If you require more than 90 minutes for your presentation, submit a WORKSHOP proposal on Workshop Proposal Form available at our website.

Section – Choose ONE: [ ]  ACT [ ]  Clinicians [ ]  Education [ ]  Family Education [ ]  TLC [ ]  TRT

1. Please give a summary description. The Summary Description is for the printed brochure and program. **DO NOT EXCEED 50 WORDS. If you do it will be edited.**

2. List the three (APA-required) main educational objectives of this session in the following format. When writing objectives, please remember they must be measureable and observable and focused on the learner.
**USE**: list, describe, explain, assess, critique, demonstrate, discuss, apply, utilize, summarize.
**DON'T USE:** know, understand, learn, become familiar with, learn, gain awareness, etc. as these cannot be observed and measured

1. Participants will be able to:
2. Participants will be able to:
3. Participants will be able to:

3. List specific Adlerian concepts and techniques that will be addressed.

4. Provide a detailed summary of approximately 250 words for the **60, 75 or 90 Minutes Presentation** in the area below. In your summary please add detail of how you intend to break down the time allotted (e.g., first 15 minutes intro, 20 minutes on lifestyle, 20 minutes on applications, last 5 for Q&A). **Please include 5 references from the last 7-10 years that are relevant to your presentation; these will not count toward the 250 word summary (this is an APA requirement for all presentations)**. (Note: The summary can be prepared in a separate document and then cut and pasted on the gray box.)

Could your program be adapted to a shorter time slot? [ ]  Yes [ ]  No

Have you presented at a NASAP Conference before: [ ]  Yes [ ]  No

If yes, please indicate when: [ ]  last year [ ]  2-5 years ago [ ]  6 years or more

If not last year, what year did you last present at NASAP?

If your presentation is not accepted, would you like to present it as a poster presentation?

 [ ]  Yes [ ]  No

5. Is your program designed to fulfill **ethics** specialty credit? [ ]  Yes [ ]  No

If yes, please indicate how you are going to tie in the APA or NBCC Ethics Code.

**CURRICULUM VITA INFORMATION – ALL Presenters**

Because of our accreditation requirements, we need selected Curriculum Vita Information for each presenter, including Diplomates. **We need your full resume or vita as an attachment to your email submitting this proposal.**

**1. NEW FOR 2020** - In addition to the Vita, we need the following information that explains your qualifications to give this presentation:

1a) Name

1b) Credentials earned including degree and license, if held

1c) List training and experiences that demonstrate qualifications for this presentation topic (e.g., special trainings, supervision experiences, etc.)

Please type (or type in separate document and then copy and paste) into the box the supporting Information (items 1a thru 1 c) for THIS presentation topic

**2. Supplemental Information for Co-Presenters** Do the same for your co-presenters – attach a current vita or resume and please include all the information from 1a to 1c on the list for each co-presenter. Leave a double space between presenters.

**RECOMMENDED TEXT REQUEST (OPTIONAL)**

Send a list of books you recommend to be considered for sale at the conference bookstore.

Note: The local bookstores have started to limit their volume of ordering based on such things as the publishers’ return policies, etc., therefore, there is no guarantee that they will order your recommendations. Use the following form – if you require more space continue on another page and submit as an attachment.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Author** | **Title** | **Publisher** | **Year** | **ISBN** |
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**Include: Title, Author, Publisher & Address, ISBN # and year published – This complete information is required and we do not look it up for you.**

**CONFLICT OF INTEREST**

During the past 12 months has the presenter or their spouse/partner had a financial, professional or personal relationship that might potentially bias and/or impact content of the educational activity/session?

Yes [ ]

No [ ]

If yes, please explain:

**AUDIO VISUAL REQUEST**

Do you require a PowerPoint projector:

[ ]  No, I DO NOT need a Power Point projector.

[ ]  Yes, I DO need a PowerPoint projector. I realize I need to furnish my own laptop.

 My laptop is a: [ ]  PC; [ ]  MAC (I realize I need to bring my own connector for my MAC).

[ ]    Yes, I DO need a PowerPoint projector. I will be using an iPad/tablet (I realize I need to bring my own connector such as a micro hdmi to vga adapter)

DUE TO AVAILABILITY OF SOUND PORTS AND THE COST OF SOUND FOR PRESENTATIONS, PLEASE CHECK BELOW ONLY IF SOUND IS ESSENTIAL FOR YOUR PRESENTATION.

[ ]  I will require sound for a video presentation using my own computer

**FAMILY, COUPLE or INDIVIDUAL DEMONSTRATIONS** – On rare occasions a presenter plans to do a family, couple or individual demonstration in the session and does not want to use a volunteer from the audience. Please note that the local group cannot guarantee that they can find a family, couple or individual for you, but if it is essential that you have a family, couple or individual, please check here and someone from the conference committee will follow up with you. [ ]

**PLEASE NOTE EXTENUATING CIRCUMSTANCES** (e.g., your child is graduating Sat. so you must present Fri.) and these will be dealt with on a case by case basis.

**PRESENTER AGREEMENT (***READ IT CAREFULLY – FAILURE TO COMPLY MAY MEAN CANCELLATION OF YOUR PRESENTATION OR WORKSHOP* **–** that’s why it’s in bold capital letters**)**

**YOUR PROPOSAL WILL NOT BE CONSIDERED UNLESS YOU INDICATE YOUR AGREEMENT AND COMPLY WITH THE FOLLOWING CONDITIONS BY MARKING EACH OF THEM WITH A CHECK MARK AND TYPING YOUR NAME BELOW.** **THE PRIMARY PRESENTER’S AGREEMENT REPRESENTS THE AGREEMENT OF ALL CO-PRESENTERS. WE ONLY COMMUNICATE WITH THE PRIMARY PRESENTER AND IT IS THE PRIMARY PRESENTER’S RESPONSIBILITY TO INFORM THE CO-PRESENTERS OF THIS AGREEMENT.**

[ ]  I and my co-presenters will register for the two-day (Friday-Saturday) portion of the conference by the early registration deadline.

[ ]  I and my co-presenters understand that failure to do so may result in automatic cancellation of my program or workshop.

[ ]  I and my co-presenters will abide by the APA Ethical Principles and/or the ACA Ethical Principles and/or AAMFT as they might apply to my/our presentation and will apply an awareness, knowledge and skills regarding the principle of social equality in my/our presentation. This is because our accreditation for CEU’s comes from APA and NBCC.

[ ]  I have explained these agreements with my co-presenters and they have given me permission to sign off on this on their behalf.

**Typed Name:       Date:**

**AUDIO VIDEO RECORDING - CHECK ONE OF THE TWO FOLLOWING STATEMENTS CONCERNING AUDIO RECORDING OF YOUR PRESENTATION AND SIGN BELOW:**

[ ]  I hereby give NASAP and their representatives, employees, officers, and anyone whom they may authorize the right and permission to make audio or video recordings of my presentation for NASAP without compensating me in any way. I hereby waive any right to inspect or approve the finished audio or video recordings, which will not be edited in any way, and I hereby release and discharge NASAP, their representatives, employees, officers, and anyone whom they may authorize from and against any liability in the making and selling of audio or video tapes of my NASAP presentation. This does not guarantee that NASAP will record your presentation.

[ ]  I do NOT agree to have my presentation considered for recording. I understand this in no way affects the

evaluation of the presentation proposal; it simply requests that my presentation NOT be recorded.

Typed Name:  Date:

**NOW THAT YOU ARE FINISHED, Before sending in your file, SAVE IT WITH YOUR NAME FOLLOWED BY NASAP2020 PRESENTATION** (e.g., MyName\_NASAP 2020 Presentation). If you submit more than one, please indicate each submission by adding a number after your name (e.g., MyName1\_NASAP2020Presentation).

**Note: OCTOBER 1, 2019 is the submission deadline for presentations. Your proposal may NOT be considered if it is submitted past the deadline, is in any way incomplete, or exceeds word or page numbers. Please note ALL PROPOSALS must be electronically postmarked (e-mailed) by OCTOBER 1, 2019 to** **office.nasap@gmail.com****.**

**An email will be sent within 10 working days of receipt of your electronic proposal. If you do not receive an email within that time, please notify Katie Hilley in the NASAP office at officenasap@gmail.com.**

**There is a different application form for Posters – the deadline for POSTER presentations is March 15, 2020. See Poster application on our website.**