

Call for Presenters

60th Annual Institute on Addiction Studies

Sunday, July 14 - Thursday, July 18, 2019

Ivey Spencer Leadership Centre - London, Ontario, Canada

You are invited to submit a proposal for a workshop for the 60th Annual Institute on Addiction Studies. Please fill out this form as completely as possible as selections will be primarily based on the information you provide here. If you have any questions, please contact the Institute on Addiction Studies 1-866-278-3568 or email: info@addictionstudies.ca

Please fill in this form, print out then submit by print this form and FAX to (1-888-898-8033) or send by regular mail to Addiction Studies Forum Inc. Box 322 Virgil, Ontario L0S 1T0

Feel free to save this form to your hard drive and send via email to: info@addictionstudies.ca

We request that all submissions be submitted on or before **Friday December 7th, 2018**

For a further look at our conference, please go to our web site: www.addictionstudies.ca

Please indicate the length of your presentation:

3 hours (half day) 6 hours (full day) 1 day certificate course 2 day certificate course

Please enter in the information in the appropriate field then "Tab" to the next field.

Proposed session title:

Presenter(s) name(s):

Address:

Phone #'s Work: Home: eMail:

Organization:

1. BRIEF description of proposed session (100 -150 words). **PLEASE DO NOT EXCEED WORD LIMIT** as the workshop description must be edited to fit in the conference brochure with the presenter(s) biography.

2. **BRIEF** biography of presenter(s) (50 -100 words). For multiple presenters please send separately.

3. Indicate the level of experience required for participants that your session will be directed at. The level of experience selected will be indicated on the Institutes brochure and web site.

Level 1. Beginner (no experience or knowledge) :

Level 2. Intermediate (some experience or knowledge) :

Level 3. Advanced (substantial experience or knowledge) :

4. Briefly describe the techniques/methods you would use to conduct this session.

5. How would participants benefit from attending your sessions?

6. Does your presentation qualify (or has your presentation been approved) for Continuing Educational Units (CEU's) by a recognized professional certification organization, board of other recognized organization? (CACCF, CPGC, ATSS, etc.)

YES: NO: If Yes, please indicate organization

NOTE: all presentations will be submitted for pre-approval for CEU's by the Canadian Addiction Counsellors Certification Federation (CACCF). Addiction Studies Forum Inc. is not responsible for the approval or denial of CEU's.

7. Have you previously conducted this or a similar presentation?

YES: NO:

References: Please provide one (1) professional reference from a previous presentation.

Contact name/title :

Organization :

Phone/email :

Don't forget to save this form to your hard drive!