

CALL FOR PRESENTATIONS

Your Invitation to submit a professional development seminar proposal, and benefit by:

- **Increasing** your visibility and networking with thousands of providers and industry experts throughout the state and region.
- **Enhancing** the quality of care and life provided to residents and customers.
- **Contributing** your expertise and leadership to the growing body of knowledge in long term care.

Submissions are to be directed to:

Adriana Manning, Manager Educational and Administrative Services
CAHCF
111 Founders Plaza Suite 1002
East Hartford, CT 06108

860-290-9424 (tel)
860-290-9478 (fax)
cahcf@cahcf.com (e-mail)

Application for Educational Seminar

Please complete both sides of this application and attach your seminar proposal.

Proposal submitted by _____ Telephone _____

1. Seminar

Title: _____

2. Description: Attach a 75-150 word, typed description which:

- Outlines the topics that will be addressed;
- Explains the value of the information and identifies new/unique applications;
- Specifies the CAHCF constituency to which the topics most closely applies; and
- Identifies instructional techniques that will be used.

3. Learning Objectives: Describe three learning outcomes that participants will achieve.

1. _____

2. _____

3. _____

4. Seminar Attributes: Designate one selection for each of the following:

CAHCF Constituency:

- SNF
- Subacute
- ICF
- Independently Owned
- Multifacilities

Length:

- Full-day
- Half-day

Level of Sophistication:

- Introductory
- Intermediate
- Advanced

Instructional Methods:

- Lecture
- Panel
- Case Study
- Workshop
- Other _____

5. Biographical Information: (Please attach a 50 word biographical sketch, resume, or vitae.)

6. Please list your audio visual needs, so that we may properly prepare our expense budgets.

7. Please include any applicable fees for which CAHCF would be responsible.