**41st NVWG Virtual Adaptive Sports Conference**

**Proposal Submission Form**

1. **Type of Session**:
* 60-minute Session
* 15-minute Power Session
1. **Speaker Information:** Provide information as it should appear in the program.
	* Name (include all credentials):
	* Title:
	* Agency:
	* Telephone:
	* E-Mail Address:

**Co-Speaker:**

* Name (include all credentials):
* Title:
* Agency:
* Telephone:
* E-Mail Address:

*Add additional Co-Speakers as needed*

1. **Session Title:** *Must be descriptive of the content and limited to twenty words*
2. **Session Description:** *Must be descriptive of the session and limited to 150 words.*
3. **Learning Outcomes:** *At the conclusion of the program the learner will be able to: (to do what)*

*See Action Verb suggestions (see final page of this form) to use at the start of each objective.*

1. **Session Outline:** Provide a detailed session outline of content and methodology. Please plan for the session a time appropriate with the type of session you selected above.

Example Session Outline:

|  |  |
| --- | --- |
| **Topic/Title** | **Time** |
| Introduction and Overview | 5 |
| Main Content / Case Studies | 40 |
| Q&A – Closing Thoughts | 15 |
| **Total Time** | **60** |

Example Power Session:

|  |  |
| --- | --- |
| **Topic/Title** | **Time** |
| Introduction and Overview | 5 |
| Presenter 1 | 15 min |
| Presenter 2 | 15 min |
| Presenter 3 | 15 min  |
| Q&A | 10 min |
| **Total Time** | **60** |

1. **Instructional Methods:** Instructional methods used: (e.g., lecture, discussion, demonstration, debate, panel, experiential, video, etc.) Provide a brief description of how you will deliver the information to engage your audience in a virtual world. We are looking for virtual interactive sessions. Please indicate if you may like us to assist you with ideas or the technology.
2. Are you a recipient of the National Veterans Sports Program and Special Events Adaptive Sport Grant? *\*Note: Grant recipients should not use grant funds to participate in the national rehab events.*
	* Yes
	* No
3. Are you promoting a specific product, vendor or company?
	* Yes
	* No

If yes, please provide additional information.

**Submit this form to:**

**Alison.Pruziner@va.gov** **and** **Kristine.Goedhard@va.gov**

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