CALL FOR PAPERS



26th Annual Statewide CARD Conference.

January 18-20, 2019

Orlando. Florida

All Proposals due by May 30, 2018

CALL FOR PAPERS DETAILS

Please read all instructions carefully. Green highlights are important reminders and yellow are areas that MUST be completed. Appropriate presentation should include description of innovative and research-based best practices, research findings, program developments, and practical information and teaching approaches.

The Centers for Autism and Related Disabilities (CARD) and Providing Autism Links & Supports, Inc. (PALS, Inc.) invite proposals for presentations at the 2019 26th Annual Statewide CARD Conference, Friday, Saturday and Sunday, January 18-20, 2019, at the Florida Hotel & Conference Center. 1500 Sand Lake Road. Orlando. FL 32809.

CARD, a Florida statewide program, brings together a wide range of professionals and parents to share information about individuals with autism spectrum disorders and dual sensory impairments. The purpose of the conference is to provide education and information to professionals and families committed to individuals with autism spectrum disorders, dual sensory impairment, and related disabilities. Audiences range from families of newly diagnosed toddlers to leaders in the field of autism research and treatment.

Presentations range from 60 to 90 minutes in length. Presenters may be asked to repeat their presentation.

Proposal Format: To be considered for acceptance, proposals must include the following:

- **Presentation Title:** 10 word maximum
- Content Track:
 - o Options:

- Nature of Autism Spectrum Disorders and Related Disabilities/Early Intervention (targeted toward newly involved families and early intervention professionals)
 - o Nature of autism, early signs, diagnosis and treatment
 - o Getting started IEP development, early intervention
 - o Basics of instruction and intervention

Educational Strategies

- o Social skills and inclusion strategies and issues
- o Communication programming
- o Curriculum and classroom issues
- o Models of instruction and delivery
- Sensory and attention issues
- Educational Innovations

Family Support

- o Practical recommendations for home living, parenting issues
- o Advocacy and education, rights and responsibilities
- o Family relationships, sibling issues
- o Community supports, leisure activities, quality of life

• Specialized Populations

- Asperger Syndrome education, social interventions
- o Deaf-blindness education, inclusion
- Adult/Transition-employment, residential options, selfdetermination, personal perspectives

• Advanced Topics

- o Research and clinical results
- Medical and genetic aspects
- o Other topics as appropriate
- Presenter Information: ALL ITEMS MUST BE COMPLETED FOR EACH PRESENTER and a copy of each presenter's vita (6 page maximum) forwarded with worksheet. If you do not have a curriculum vita, a resume is acceptable.
- Conference Program Description: A 50-100 word description for the Conference Program.
- Learning Objectives/Outcomes: This section should provide three (3) learning objectives and outcomes for the presentation, and sufficient information to determine how the session contributes to best practices and advances in the field of autism spectrum disorders or dual sensory impairments. (*Speakers may be asked to submit additional presentation materials.*)
- **3 References:** Some continuing education disciplines now require **3 APA formatted** references for each submitted presentation. If your presentation is a personal reference presentation simply write: this is a personal presentation.
- AV: All rooms will be provided with a:

- o PC laptop
- o Projector
- o Screen
- o Table for the equipment
- o Microphone if the room size warrants one
- If you are a MAC user, please make sure the presentation will play properly on a PC. Presenters are required to bring presentations on CD or flash-drive and a back-up is suggested. If your presentation has video please make sure the clips are downloaded on the flash drive with the presentation (if this is not done your video input will not play on another computer). If you are not sure how to do this or have not done it before, please contact our office for assistance 407-823-6020.

REVIEW PROCESS: All proposals will be acknowledged as received. A panel will review proposals. Proposals selected will provide balanced content and broad geographic representation. For 2019, emphasis will be on advanced topics. All accepted submissions will be notified by June 29, 2018. Submitting a proposal represents a commitment to attend and present, if accepted.

Note: Deadline to submit proposals: Must be submitted/received or emailed by May 30, 2018(5pm) to:

Mail: Call for Papers PALS/UCF-CARD P. O. Box 781458 Orlando, FL 32878-1458 Electronic: judee.samuels@ucf.edu Subject Line: CFP CARD 2019

Electronic submission is preferred and must be in by May 30, 2018 5pm

Proposals that are received after May 30, 2018 (5pm), the submission deadline, or do not provide the requested information, will not be considered for the program.



26th Annual CARD Conference

January 18-20, 2019

FLORIDA HOTEL & CONFERENCE CENTER. ORLANDO. FLORIDA

CALL FOR PAPERS WORKSHEET

(Fill out completely)

PRESENTER INFORMATION



Presenter(s) Full Name:			
Highest Degree Earned/Cred	<mark>lentials</mark> :		
Co Presenter Full Name:			
Co Presenter Degree Earned	/Credentials:		
use only one address			
Address:			
City:		<mark>State</mark> :	<mark>Zip</mark> :
Home Phone:	Cell Phone:		Email:
Biographical Statement for presenter(s) (150 Word Limit):			

Have you ever presented at a CARD conference in the past?	Yes No
If yes, when did you present:	

Vitae: Please remember to attach your vita (short version is permissible, please no longer than 6 pages if possible) or a resume (this is required for continuing education submission)

Photo: Please submit a digital photo electronically with your submission at least 300dpi.

PRESENTATION



All areas <u>MUST</u> be filled in. Please proof read your content. If selected this is how it would be printed in the conference program, on the web site, and used for the Continuing Education Units submission. Please be as clear and concise as possible and double check spelling/grammar.

Title of Presentation:

Presentation Objectives: Please provide at least 3 learning outcomes for your

presentation, in the following format: As a result of this activity, participants will be able to:

1.

2.

3.

3 APA references:
1.
2.

3.
Presentation Abstract (150 words):
Content Track (check all that apply): Educational Behavioral Personal Speech Introduction to ASD & Related Disabilities Research Legal Issues Adult Issues Transition Issues Health Other-please specify other:
Level of the presentation:
Presentation focuses on: Please check most appropriate psychological assessment and/or intervention ethical, legal, statutory or regulatory policies, guidelines and standards that impact psychological practice, education, or research content focuses on topics related to psychological practice, education, or research other than application of psychological assessment and/or intervention methods that are supported by contemporary scholarship grounded in established research procedures
Length of Presentation: ☐ 75 minutes ☐ 90 minutes ☐ I can adapt this presentations time if necessary.
Presentation Format: Panel Lecture Group Discussion

AUDIO VISUAL NEEDS



We attempt to make audio visual needs a seamless process. Every room will be equipped with a large

screen, a projector for your presentation, and a personal computer (PC) laptop. Some rooms will have sound provided for video and a microphone. It is important if your presentation has video and or sound that you mark this. Make sure when you are transferring files to a flash drive/USB that you transfer your sound files too. **Audio Visual:** I understand if I am a MAC user I must make sure my presentation will work on a PC I am not a MAC user I understand I MUST transfer my sound files if applicable to the flash drive my presentation is on otherwise I will not have sound/video in my presentation YES I may need guidance with this I do not have sound/video in my presentation **MY PRESENTATION:** • will be in PowerPoint format YES □NO • If no what format:

• will have sound

will play videowill require internet

Please initial: I understand that internet access may NOT be available in the room for my presentation and if I need such that I must confirm with the conference coordinator at least 2 months prior to the conference. I understand that flipcharts, and VCRs are not available. If I need such I may bring my own to use, but must inform the conference coordinator in advance to prepare for any changes with the hotel.

YES

YES

YES

NO

NO

NO

PRESENTER PERMISSION



May we take	photographs/video during your presentation?
presentation of to reduce cost and	ermission for registrants to have access to your PowerPoint/handout for your electronically via a PDF for a limited time? (For the past several years we have gone greer d save our environment. We do not print a program with all PowerPoint presentations. We provide security code to access presentations from a sky drive for a limited time to print prior to the
will fo	permission for the participants to access a PDF version of my PowerPoint which I brward in grayscale with 3 slides per page \square No
wish t	have handouts (these are not your PowerPoint, but additional information that you o share) I'd like to share with participants that are pertinent to my presentation $ \square No $
	not share any PowerPoint or handouts with participants for my presentation $\square No$
proposal is ac presenters pe A CARD staf your responsi	nd that submission of this proposal is acceptance of your attendance if your cepted. If proposal is accepted your registration fee (up to a total of two r presentation) will be waived. You will NOT need to register for the conference f member will register you. All hotel/accommodations and travel charges will be bility. If you desire to obtain CEUs or wish to attend any other conference trequire a fee, you understand you will be responsible for payment.
☐ I agree wi	th the terms printed above. Signature:
Date:	
our typed signa	ture is the same as a signed signature. Incomplete applications will not be accepted.

Submit electronically to judee.samuels@ucf.edu subject line CFP CARD 2019 or complete all forms and mail to PALS, PO Box 781458, Orlando, FL 32878-1458 to arrive by May 30, 2018.

407.823.6020 407.823.6012(fax)