Thank you for choosing to submit a proposal for atraditional workshop session at our 2020 Annual Conference, 2020 Vision: Convene. Connect. Collaborate. to be held from May 3-5, 2020 in Dallas, Texas. This year we envision offering a variety of workshops that showcase high impact solutions, innovative practices, and dynamic responses. We are asking you to think about what our sector can learn from your agency as we forge forward into the new decade. Our goal is for everyone to leave this conference with newfound energy, important takeaways, and exceptional strategies that will strengthen your work and your communities.

The deadline for submission is Friday, September 27, 2019. Please contact Lisa-Loraine Smith, Chief Program Officer, at 201-977-2542 or llsmith@networkjhsa.org with any questions.

Please be mindful of the following guidelines:

- 1. Workshop presenters can include professional and lay leaders from NJHSA member and partner agencies, as well as, including outside speakers who would add value to their presentation.
- 2. Outside presenters are also invited to submit session proposals with the understanding that priority is given initially to NJHSA member agencies.
- 3. Presenters should be able to lead a workshop that motivates active participation from session attendees.
- 4. All workshop sessions are 75 minutes long.
- 5. Please factor in time for both an interactive presentation discussion and a Q&A period.
- 6. Submission of a proposal by an NJHSA member agency requires a commitment by the presenter to register and attend the entire conference should the proposal be accepted.
- 7. Proposals from one agency may be combined with proposals from another one or more agencies should the overall concept or theme for the proposed sessions be comparable.
- 8. Incomplete submissions WILL NOT be considered for review by the conference committee.
- 9. At least one session per day will be directed to support the specific needs of lay leadership.

1. Contact Information	1	
Name of agency affiliation		
Address of agency		
City, state and zip		
Agency CEO		
Agency CEO email address		
Name of primary contact for this proposal		
Preferred email of primary contact		
Cell phone # of primary contact		
Work Phone #		

	Agency Management
	Crisis Response
	Executive Leadership
	Lay Leadership
	Capacity Building
	Advocacy
	Development/Fundraising
	Marketing/Communications
	Addiction Services
	Adoption Services
	Child/Adolescent Services
	Disabilities Services
	Holocaust Survivor Services
	Home Care Administration
	Immigrant Services
	Mental Health Services
	Older Adult Services
	Refugee Services
	Workforce Development
	Volunteer Services
	Chaplaincy Services /Spiritual Care
	Poverty Programs
	Innovative Practice
	Other (please specify)
3. Ti	itle of Proposed Workshop (please make it short, catchy and descriptive)

	imum of 3 key	/ learning g	oals from yo	our proposed	workshop	session.		
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2.								
3.								
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8. Please indicate	e any session need	ls: Screen, proje	ctor, flip charts, r	narkers, reques	ted room set up.
*All presenters w	ho are using a Pow	verPoint or video	presentation are	e required to bri	ng their own
	will provide a proje				

Yes				
No				
10. We know some agencies		•	•	
present with more than one p	erson. With that in r	mind, please complete	the following info	ormation.
Name of Presenter 1				
Agency Afiliation and Title of Presenter 1				
Email address of Presenter 1				
Name of Presenter 2]
Agency Affiliation and Title of Presenter 2]
Email Address of Presenter 2]
Name of Presenter 3				
Agency Affiliation and Title				
Email Address of Presenter 3]

Network no later than April 3, 2020. We look forward to hearing from and being with you in Dallas.