VISIONS – Spotlight on the Future
Florida’s Tenth Annual Special Needs Week Conference
February 13 & 14, 2003 Orlando, Florida
FFDCDT-Florida Federation/Division on Career Development and Transition
FSNA – Florida Special Needs Association

Presenter Application

Return to: Karen Wesley
P.O. Box 3702
Orlando, Florida 32802
407-894-7829 FAX 407-894-5707
karennui@aol.com

Directions: Please type or print application. Mail the completed application along with a 3.5” disk of your presentation abstract (Microsoft Word/IBM format) and a self-addressed stamped envelope OR submit the required information via E mail (Microsoft Word/IBM Format) no later than Tuesday, October 30, 2002. E mail submissions are encouraged. A separate form is required for each presentation application. Individuals submitting proposals will be notified of the committee’s decision by November 4, 2002.

NOTE: Presenters must register in order to attend conference sessions.

LEAD PRESENTER – Primary Contact (This person will receive ALL correspondence)

Name/Title
Agency/Organization
Address
Number & Street City State Zip
Daytime Phone FAX
Home Phone E mail

CO-PRESENTER(S) (Lead presenter is responsible for all communication with co-presenters)

Name
Agency/Organization
Address
City State Zip Code Phone
Name
Agency/Organization
Address
City State Zip Code Phone
Name
Agency/Organization
Address
City State Zip Code Phone
Presenter Application
VISIONS – Spotlight on the Future

Session Type:  Workshop  Panel Discussion  Educational Display
(Please indicate one)

Target Audience:  Beginner  Intermediate  Advanced
(Please indicate one)

Theme Track  

Presentation Title  

Description of Presentation  (Provide a brief description, 100 words or less, of your presentation as you would like it to appear in the conference program.)

Abstract  (brief outline of the content of the proposed session as well as background information on the topic. Describe any visual aids and handouts)

AV Needs  (AV needs must be submitted with proposal in order to be guaranteed)

Overhead  Screen  TV/VCR

Presenter Accommodations  

Submission Checklist

- Completed Presenter Application
- Presentation Abstract - a description of your presentation as you would like it to appear in the conference program. (50 words or less)
- 3.5 disk of your presentation abstract or e mail attachment (Microsoft Word/IBM format)
- Designation of audiovisual needs.
- Self Addressed Stamped Envelope (ONLY for notification via US Mail)

Presentation Questions?
Contact Karen Wesley  407-894-7829, FAX 407-894-5707, E mail karennui@aol.com

Revised 09/10/02