



Prader-Willi Syndrome Association (USA)

Professional Providers Conference

THURSDAY, November 16, 2017
CALL FOR PRESENTATIONS
Deadline for Submission is AUGUST 25, 2017

with PWS?		
years	months	
Presenter(s) – Complete	for each presenter. Attach additional sheets a	s necessary.
Name/Degree:		
Organization/Profession	al Affiliation:	
Address:		
 Telephone:		
E-Mail:		
Name/Degree:		
Name/Degree: Title:		
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	Tele	phone:
	Fax:	
	E-M	ail:
4.	Audi	ovisual needs:
		TV/VCR
		Slide projector/screen
		PowerPoint Projector/screen
		Laptop
		Other
	Desc	ribe any details related to equipment needs:
5.	Sess	ion Description:
	A.	Please provide a synopsis, either in paragraph or outline form, of the proposed topics for your presentation. Include the format you intend to use (lecture, panel discussion, attendee participation) to meet the session's objectives. Include the anticipated length of your presentation.
	В.	Below, please write a brief summary (25 words or less) of your presentation. This will be used in the conference program.

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Proposals may be submitted in hard copy or e-mail form to:

Mary K. Ziccardi C/O REM-Ohio 9775 Rockside Road, Suite 200 Valley View, Ohio 44125 Mary.Ziccardi@thementornetwork.com