

Course Title:

Presenter(s):

*Please indicate how you would like your name(s) represented on promotional materials. **Please submit a CV, Bio, and head shot for each presenter with this form.** The CV will be kept on file for private sponsor agency reporting only. The Bio and head shot will be used for promotional materials.*

Presenter Experience:

Please include all relevant presentation experience and credentials for this subject area.

References:

Please list at least one or more professional references that can speak to your experience giving presentations. (name, title, organization, email address, and phone number)

Course Description: Provide a two to three sentence summary of the workshop.

PBC is an approved continuing education sponsor for the APA and the Maryland Boards of Social Work Examiners and Professionals Counselors and Therapists. *As you draft your workshop proposal, please note the list of learning activities that ARE NOT ACCEPTED by the Board of SWE: <https://health.maryland.gov/bswe/Pages/LearningActivities.aspx>*

Honorarium Request: \$ _____ or I will present this workshop at no cost to PBC ___ Yes ___ No

Workshop Length:

Total presentation time in hours and minutes.

Workshop Level: Beginner Intermediate Advanced

Ideal Workshop Audience Size (number of people):

Typical workshops attract 30-50 people, if you would prefer to present to a smaller or larger group, please let us know here.

Maximum Workshop Capacity (total registration):

If you do not have a preference, please leave it blank.

Consent to Distribute PPT Slides: ___ Yes ___ No

PBC distributes workshop PPT slides to registrants two days prior to the event and following the event.

If you do not want PBC to distribute the presentation slides, then we are happy to assist you in developing a handout notetaking version for participants.

Consent to Distribute Zoom Recording: : ___ Yes ___ No

PBC will record the presentation for internal documentation and CEU program requirements.

This recording will be retained for 5 years.

Learning Objectives: *Please provide three to five objectives in APA format. For guidance, please utilize the below APA resource when formatting training objectives.* <https://www.apa.org/ed/sponsor/resources/objectives.pdf>

Workshop Schedule:

Workshop References: *Research, references, or sources that will be used for your presentation. Please list at least three (3) peer reviewed articles and any other articles, books resources...etc.*

Additional Relevant Details:

Optional Section: Pro Bono Counseling strives to solicit a diverse group of presenters for it's continuing education workshops. Completion of this demographic section is optional. Information shared in this section is kept confidential and used only by PBC event planning staff for program monitoring purposes.

Please click the link below to complete a very short survey to share a little about your identity with PBC.

<https://www.tfaforms.com/5094144>