

**FEATURE PRESENTATION**

**Proposal Submission Form**

# 2017 FWATA Annual Meeting & Clinical Symposia

**July 12 - 16, 2016 · Kona, HI**

Complete the Submission Form by providing requested information in the text fields. Please refer to *Feature Presentation Guidelines* for information regarding this format. Submit proposal in Word format.

Submit (email) completed Submission Form and all required materials to:

Kristine Boyle-Walker, MPT, OCS, ATC, CHT

Education Program Chair

KLBOYLEWALKER@gmail.com

Title of Presentation:

Speaker 1:

Sub-Title of presentation:

Presentation Length:       min

Speaker 2:

Sub-Title of presentation:

Presentation Length:       min

Speaker 3:

Sub-Title of presentation:

Presentation Length:       min

**NOTE:** *Total length of session is 2 hours: 1hour 45min of lecture and 10min for question & answer time.*

Domain(s) of Athletic Training: select all that apply to the proposed presentation

I – Injury/Illness Prevention and Wellness Protection

II – Clinical Evaluation and Diagnosis

III – Immediate and Emergency Care

IV – Treatment and Rehabilitation

V – Organizational and Professional Health and Well-Being

Educational Level of Presentation: identify educational level for *overall* presentation

Essential  Advanced  Mastery

Abstract (100 words or less):

Outline of Session

Learning Objectives: provide a minimum of three (i.e., *“Attendees will be able to … identify…explain…define…”*)

1.

2.

3.

4.

5.

Purpose, Knowledge, Competency or Performance Gap Addressed by the Session

Expected Outcomes

Educational Materials Offered to Participants (outline, notes, PowerPoints, etc.)

References/sources: list 3-5 sources used in development/support of the content of the presenation. Utilize format as described in the *Journal of Athletic Training* authors’ guide:

<http://www.nata.org/sites/default/files/JAT-Authors-Guide-2010.pdf>

1.

2.

3.

4.

5.

Speaker Information (required for **each** speaker):

Name & Credentials:

Title or position:

Place of employment:

Address:

Email:

Work Phone:       Cell phone:

NATA Member:  Yes  No NATA Member #:

***Attach CV (word document or pdf) with Submission Form***

Name & Credentials:

Title or position:

Place of employment:

Address:

Email:

Work Phone:       Cell phone:

NATA Member:  Yes  No NATA Member #:

***Attach CV (word document or pdf) with Submission Form***

Name & Credentials:

Title or position:

Place of employment:

Address:

Email:

Work Phone:       Cell phone:

NATA Member:  Yes  No NATA Member #:

***Attach CV (word document or pdf) with Submission Form***

Proposals must be submitted no later than **September 1, 2016**.

Incomplete (e.g., missing speaker CV, outline) and/or late proposals will NOT be accepted.

**Thank you for your submission!**