**HAWAI**'**I ASSOCIATION OF SCHOOL PSYCHOLOGISTS**

**CALL FOR PROPOSALS: Mini-Conference**

HASP invites you to submit a proposal for a Hawaii Association of School Psychologists Mini-Conference!

Submissions and questions will be accepted via email at **HASP808@gmail.com** Please use the subject line: “Proposal Submission: Mini-Conference.” Proposals will be reviewed and considered on an as-needed basis. Mini-Conferences may be held throughout the state, at any point in the year.

The following information should be included within the body of the e-mail:

* Presenter(s) names:
* Title of the presentation/proposal:
* Contact information:
1. Please specify if you would like to do a 3-hour workshop (half-day), a 6 hour workshop (full-day), or two-day mini-conference.
2. Proposal should be attached to your email, which includes your contact information. The content of the actual proposal should consist of the following components:

a. Title of the proposed presentation or poster

b. Names, titles, and affiliations of editor(s)/author(s)

c. PowerPoint, handouts, outlines, etc.

2. ABSTRACT

The abstract should be no more than 500 words in length. Please specify the specific 10 domains of the NASP practice model your presentation will cover. Please include a summary of the content and how it will be organized. It should also discuss how the proposed work will contribute to the field, emphasizing its relevance to school psychology (and other educational or mental health professionals, as appropriate).

3. FEES

Please specify if you request costs covered by HASP, such as airfare, accommodations, etc. Also include if these costs may be fully or partially reimbursed by a publisher or organization with which you are affiliated. This will aid our small organization with planning.

4. TARGETED AUDIENCE

We would like to match presentations to participants’ specific needs; please indicate the types of professionals your presentation is geared towards: school psychologists, school counselors, administrators, teachers, occupational therapists, speech/language pathologists, parents, etc.

5. BIOGRAPHY

Please attach a brief biography along with a photo to be used in conference announcements and program.

6. AVAILABILITY

Please indicate your availability and/or preferred conference date(s).

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**Call for Proposal Form: Mini-Conference**

**Proposal Title:**

**Presentation Format:**

[ ]  3 Hour Workshop (half day)

[ ]  6 Hour Workshop (full day)

[ ]  Two-day Workshop

**Names, Titles, And Affiliations of Presenters:**

**Target Audience:**

[ ]  School Psychologists

[ ]  Clinical Psychologists

[ ]  School/District Administrators

[ ]  Other School Mental Health Professionals (e.g., counselors, social workers)

[ ]  Community-Based / Private Practice Clinicians

[ ]  Teachers

[ ]  Parents

[ ]  Other (Please Specify):

**Abstract (500 word maximum):**

**Fee Requests (if any):**

**Primary Presenter Brief Bio (for breakout and workshop sessions only):**

**Primary Presenter Picture (include as additional attachment)**

**Availability:**