

2018 NAMI Illinois Annual Conference & Convention “Creating a Community of Support” October 12-13, 2018

General Information

1. The purpose of the NAMI Illinois Annual Conference 2018 is to bring mental health advocates under one roof while spotlighting topics relevant to mental health and wellness. The event will host a large variety of audiences, including mental health providers, leaders, social workers, clinicians, government officials, criminal justice partners, individuals with lived experience, and family members. This year’s theme, “Creating a Community of Support” will recognize the variety of individuals, organizations, resources, research, interventions and innovation that are necessary components of a community that is truly responsive to mental health needs.
2. Presentations should reflect current trends and expand upon the theme of “Creating a Community of Support.” This includes four tracks:
 - a. Policy & Advocacy: Topics related to mental health advocacy at the local, state and federal level and how promoting our legislative priorities is critical to creating a community of support.
 - b. Consumer & Family Engagement: How to strengthen our voice as a unified network of lived experiences, increase visibility and impact, and promote mental health wellness and recovery.
 - c. Strengthening NAMI: For affiliate leaders, affiliate staff and key volunteers to learn how to grow their NAMI to better serve our communities.
 - d. New Research, Practices, Interventions & Innovation: New and innovative research, programs, interventions and practice that contribute to the development and strengthening of a comprehensive mental health system.
3. Materials may not be sold during presentations.
4. Presentations will be **one 90-minute session** (with the last 15 minutes for questions). Conference planners may later ask you to combine multiple presentations as part of a panel as a way to expose conference attendees to as many innovative ideas as possible for our state conference.
5. Conference registration fees may be waived for 1 presenter per accepted proposal.
6. Presenters need to provide their own handouts (greatly appreciated by participants). PowerPoint presentations will be provided on NAMI Illinois’ website to conference attendees.
7. Proposals must be submitted on this form with additional page for abstract emailed or **postmarked by Friday, April 13, 2018**.
8. Notification of proposal acceptance/decline will be made by June 1, 2018.
9. If your presentation is selected, an outline, PowerPoint, or copy of your Handout(s) must be submitted no later than **July 1, 2018** for the purpose of obtaining Certification for your presentation.

▪ **Suggested Presentation Title:** _____

- **Include a detailed, timed agenda for your presentation**

▪ **Targeted Audience for your presentation (check all that apply):**

New to Mental Health	_____	Professional or Advocate in Field:	_____	Peer Staff:	_____
Intermediate Knowledge:	_____	Family Impacted by Mental Illness:	_____	Affiliate Leadership:	_____
Advanced Knowledge:	_____	Person Impacted by Mental Illness:	_____	Government Leaders:	_____

▪ **Presenters Bios**

Please attach a biography for each individual who will be included in this presentation.

▪ **Presentation Abstract (150 words maximum.)**

On a separate page, provide a description of the content, goals and style of your presentation and your target audience/group(s). Include as much detail as needed to assist the Selection Committee in determining relevance and applicability to the conference **title** and **theme**: “**Creating a Community of Support**”: the importance of innovation, collaboration and advocacy during challenging times.

▪ **3 Presentation Learning Objectives (Needed for CEUs)**

1. _____
2. _____
3. _____

Please fill out completely

Name _____ Professional Title _____

Affiliation _____ Mailing Address _____

City _____ State _____ Zip _____

Phone (area code) _____ Email _____

If applicable:

Co-presenter’s name _____ Professional Title _____

Affiliation _____ Mailing Address _____

City _____ State _____ Zip _____

Phone (area code) _____ (Correspondence will be sent ONLY to the primary presenter)

Contact information for 2 references regarding prior presentations:

1) Name _____	2) Name _____
Address _____	Address _____
_____	_____
Phone _____	Phone _____

What Audio-Visual equipment will you need? Please be specific if your needs are not listed below.

Lap top computers will **not** be provided.

Handheld Mic Table Top Mic PowerPoint Projector Screen

Other Additional Notes _____

Normal Appearance Fee: \$ _____ (NAMI Illinois is unable to pay appearance fees at this time due to state budget cuts.)

In-kind contribution? (No fee charged & recognized as a collaborator in the conference flyer/program booklet) YES _____ NO _____

Preferred Slot or Availability:

Friday, Oct 12 AM Friday, Oct 12 PM Saturday, Oct 13 AM Saturday, Oct 13 PM

No Preference *(Preferences will be honored when possible, but cannot be guaranteed.)*

Notes:

SUBMISSION CHECKLIST

- COMPLETED CALL FOR PROPOSAL (CFP)
- BIOGRAPHIES FOR **ALL** PRESENTERS
- ABSTRACT
- ADDITIONAL INFORMATION
- TIMED AGENDA:
- OTHER:

**Please submit one completed proposal postmarked or emailed by
April 13, 2018 to:**

NAMI Illinois, 218 West Lawrence, Springfield, IL 62704
namiil@sbcglobal.net

For more information, please call: NAMI Illinois (217) 522-1403

You will be notified by email by June 1, 2018