



## Program Submission Proposal

**To submit a proposal:**

1. Compile your program and primary presenter information in this **Proposal** worksheet. Also, complete a **Disclosure** form.
2. For each co-presenter, complete a separate **Co-Presenter Bio** and **Disclosure**.
3. Submit **Proposals, Bios, and Disclosures** to [jgehl@nd.edu](mailto:jgehl@nd.edu). Please add "MACHA Proposal" to the subject line.
4. Retain this worksheet and your co-presenter files for future reference.

### Program Information

<p><b>Program Title:</b> The title of the proposed program should reflect the content of that program. Please note: Cute titles tend to detract from the professionalism of the conference and make it harder to determine what will be presented.</p>	
<p><b>Primary Presenter:</b> List Name, Degree, Institution/Employer, and E-mail Address.</p>	
<p><b>Co-Presenters:</b> For all co-presenters, list names, degree(s), institution / employer, and email address. You will be asked to submit a co-presenter form for each co-presenter.</p>	
<p><b>Original Research: Does your program contain or report original research?</b> If yes, please specify in the abstract below.</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p><b>Pharmacology: Will your presentation include content related to pharmacology?</b> If yes, please ensure that your objectives and content validate the pharmacology component.</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No If yes, please estimate the percentage of session content related to pharmacology. <input type="checkbox"/> 10%   <input type="checkbox"/> 30%   <input type="checkbox"/> 50%   <input type="checkbox"/> 75%   <input type="checkbox"/> 100%</p>
<p><b>Abstract:</b> Provide a short (75 words) descriptive abstract of your presentation. Please be concise and clear with your description. Your abstract will be inserted VERBATIM in conference materials. If your presentation will address original research, please specify.</p>	
<p><b>Practice Gap:</b> Briefly describe what the audience needs to "know" or "know how to do" which will be addressed by this session. Specify the source(s) supporting the existence of this gap in knowledge and / or skills (e.g., data, standards, or other evidence-based support, personal experience)</p> <p>NOTE: <i>A professional practice gap exists when there is a gap between what the professional is currently doing or accomplishing compared to what is desired / achievable on the basis of current professional knowledge.</i></p>	
<p><b>Type of Gap:</b> Based on the description of the practice gap above, this presentation will address a gap in:</p>	<p><input type="checkbox"/> Knowledge   <input type="checkbox"/> Skills    <input type="checkbox"/> Both</p>
<p><b>Description of the Current State</b> <i>EXAMPLE: Smoking is allowed on campus as long as it is not within 25 feet of any building.</i></p>	
<p><b>Description of Desired / Achievable State</b> <i>EXAMPLE: The campus is or will become a tobacco-free campus.</i></p>	
<p><b>Purpose</b></p>	

*EXAMPLE: The purpose of this activity is to enable the learner to explain the steps a campus needs to take to become tobacco-free.*

**Audience:**

Who is the *expected learner* for your program? Check all that apply, but be selective. Most programs have a primary audience (e.g., health educators, physicians, nurses). Selecting all or most disciplines when the program is for one or two specific disciplines is not helpful.

- |  |  |
|--|--|
| <input type="checkbox"/> Administrator               | <input type="checkbox"/> Pharmacist    |
| <input type="checkbox"/> Advanced Practice Clinician | <input type="checkbox"/> Physician     |
| <input type="checkbox"/> Counselor                   | <input type="checkbox"/> Psychologist  |
| <input type="checkbox"/> Dietitian / Nutritionist    | <input type="checkbox"/> Social Worker |
| <input type="checkbox"/> Health Educator             | <input type="checkbox"/> Student       |
| <input type="checkbox"/> Nurse                       |  |
| <input type="checkbox"/> Other, specify _____        |  |

**References: List evidence-based references used to develop this presentation.**

Cite specific data, journal articles, official standards or recommendations, etc.

**Diversity: Does your program address diversity?**  
(Addressing diversity is not a prerequisite for program selection.)

- No  
 Yes. Specify how the program will address diversity.

**If YES:** Describe how it addresses diversity based on:

age • gender identity, including transgender • marital status • physical size • psychological / physical / learning disability • race / ethnicity • religious, spiritual, or cultural identity • sex • sexual orientation • socioeconomic status • military veteran status

## Learning Objectives and Method

**LEARNING OBJECTIVES:** Two to three learning objectives are recommended for a 60 minute or 90 minute session. If the presentation will address mental health issues, please ensure this is reflected in the objectives.

1. Begin each objective with **one** of these **measurable verbs**:  
Describe • Recite • Explain • Identify • Discuss • Review • Compare • Contrast • Define • Differentiate • List • Outline
2. Make a separate objective for each action. Each learning objective should complete the phrase, "The participant should be able to..."  
EXAMPLE: *Define sleep deprivation and the consequences.*

These are **two separate actions** and should be **split into two objectives** as follows:

1. *Define sleep deprivation.*
2. *List the consequences of sleep deprivation.*

**LEARNING METHOD:** Include the learning method(s) for each objective.

EXAMPLES of Learning Methods: Power Point presentation, Lecture, Q / A, Group Discussion, Role Play.

**The participant should be able to...**

**OBJECTIVE 1:** Start the objective with one of the measurable verbs listed under Learning Objectives above:

**Learning Method:**

**OBJECTIVE 2:** Start with one of the measurable verbs listed under Learning Objectives above:

**Learning Method:**

**OBJECTIVE 3:** Start with one of the measurable verbs listed under Learning Objectives above:

**Learning Method:**

**OBJECTIVE 4:** Start with one of the measurable verbs listed under Learning Objectives above:

**Learning Method:**



**Presenter Bio**

The primary presenter is the main contact person for this proposal. It is the primary presenter's responsibility to ensure that the information submitted for the program and for all co-presenters is complete and accurate.

Presenter Information is required for each presenter, co-presenter, panel member, discussion leader, etc. If a presenter is speaking more than once, this information must be submitted for each program. Presenter may submit a CV in lieu of the bio information.

<b>TITLE OF THE PROGRAM:</b>	
<b>First Name:</b>	
<b>Last Name:</b>	
<b>Degree(s)</b> (as you would list them following your name – i.e., MPH, BSN)	
<b>Job Title:</b>	
<b>Institution / Employer:</b>	
<b>Address 1:</b>	
<b>Address 2:</b>	
<b>City:</b>	
<b>State:</b>	
<b>Zip:</b>	
<b>Telephone:</b>	
<b>Email:</b>	
<b>Training / Expertise:</b> Describe your training or experience that establishes your expertise on the proposed topic.	
<b>Education / Certification:</b> List your degree(s) with date and educational institution. Also list relevant certification and / or specialty areas that relate to the proposed topic (e.g., PhD in Developmental Psychology).	
<b>Publications:</b> List your publications that are most relevant to the proposed topic (up to 10).	
<b>Academic Appointments:</b> List any academic appointments.	
<b>Professional Organizations:</b> Describe your involvement in relevant professional organizations (e.g., ACHA, PCCHA).	
<b>Awards / Honors:</b> List any awards / honors received.	



**Co-Presenter Bio**



Presenter Information is required for each presenter, co-presenter, panel member, discussion leader, etc. If a presenter is speaking more than once, this information must be submitted for each program. Presenter may submit a CV in lieu of bio information.

<b>TITLE OF THE PROGRAM:</b>	
<b>First Name:</b>	
<b>Last Name:</b>	
<b>Degree(s)</b> (as you would list them following your name – i.e., MPH, BSN)	
<b>Job Title:</b>	
<b>Institution / Employer:</b>	
<b>Address 1:</b>	
<b>Address 2:</b>	
<b>City:</b>	
<b>State:</b>	
<b>Zip:</b>	
<b>Telephone:</b>	
<b>Email:</b>	
<b>Training / Expertise:</b> Describe your training or experience that establishes your expertise on the proposed topic.	
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