



**Florida Alliance of Information & Referral Services, Inc.**  
Statewide Training Symposium, February 10-12, 2010  
Regal Sun Resort, Orlando, FL  
**“2010: The Next 10 Years”**

**PRESENTER APPLICATION**

**We appreciate your interest in becoming a FLAIRS presenter. Please complete this form to provide information on your workshop proposal and return as soon as possible, no later than October 16, 2009.**

**Please send a separate proposal for each presentation submitted. Submit proposals by October 16, 2009 via mail, email or fax to:**

**Tim Sylvia, FLAIRS Program Chair**  
c/o United Way of Volusia-Flagler Counties  
3747 W. International Speedway Blvd., Daytona Beach, FL 32124-1011  
Phone: 386.366.9070 Fax: 386.253.9517  
tsylvia@unitedwayvfc.org

Name and title of Lead Presenter: \_\_\_\_\_

Organization/agency: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_

**Attach a separate sheet with your list of all co-presenters**, including titles, organization, addresses, telephone numbers and email. NOTE: Communication for groups of presenters will be the responsibility of the “lead presenter”; all correspondence will go through them to their co presenters.

**Background and qualifications of the presenter(s)** – For each presenter please provide a brief biographical sketch of formal training experience and affiliations directly related to the proposed subject matter (maximum of 150 words). **Attach an additional sheet if necessary.**

**Workshop title and description** - Please give the title of the workshop and briefly describe the major concepts to be presented (maximum of 75 words). This will serve as the description in the conference program and will serve as the basis upon which participants will select their workshop choices. **Attach an additional sheet if necessary.**

**Instructional methodology** - Please describe the learning methods to be employed for your workshop, i.e. case studies, lecture, panel, work groups, buzz groups, slides, video, etc. **(Please note that on previous conference evaluations participants reacted favorably to the use of a variety of learning methods and indicated learning was enhanced by interaction with other participants).**

**Please provide the following information, which will allow a tentative schedule to be developed.** You will be contacted to confirm your availability or remedy any scheduling conflicts. We will try to allow for personal preferences in scheduled times and days, but your flexibility will be appreciated.

**Time needed for workshop presentation.** (please "X" one)

1.5 hours                       3 hours (in 2 parts – 1.5 hours each)

NOTE: Topics less than 1.5 hours will be considered for possible combination with related presentations.

**Equipment needs for workshop presentation. Note- Internet access is the responsibility of the presenter, please make arrangements directly with the hotel's AV department.** (please "X" all that apply)

Flip chart/markers                       PC projector (to hook to *your* laptop)                       TV/VCR  
 Other: \_\_\_\_\_

**Target audience.** (please "X" all that apply)

Administrators                       Managers/Supervisors  
 Line worker/front line                       Volunteers                       Database Managers  
 Other: \_\_\_\_\_                       Anyone

**Target program.** (please / all that apply)

Child Care                       Crisis Line                       Comprehensive I&R  
 Elder                       Library                       Military                       Government  
 Other: \_\_\_\_\_

**Name of person completing this form:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**DEADLINE: October 16, 2009**  
**For additional information, please contact**

**Tim Sylvia, FLAIRS Program Chair**  
Phone: 386.366.9070  
tsylvia@unitedwayvfc.org