

**The New Jersey Eastern Pennsylvania Therapeutic Recreation Association’s 22nd Annual Fall Conference**

**VIRTUAL**

**Monday, November 16 – Tuesday, November 17, 2020**

**Speaker Application
*Please complete this application in its entirety before August 15, 2020!***

***Incomplete applications will not be accepted.***

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| **Speaker’s Name:**  |
| **Speaker’s Address:**   |
| **Daytime Phone #:** | **Email:** |
| **Relevant Audience (Check all that apply.)**\_\_Entry level therapist \_\_Advanced therapist \_\_Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_Educator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Entry level supervisor \_\_Advanced supervisor \_\_Other (Indicate): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Target Population (Check all that apply.)**\_\_Long-Term Care \_\_Assisted Living \_\_Adult Medical Day Pediatrics\_\_\_\_\_\_Rehabilitation \_\_Hospital \_\_Psychiatric \_\_Other (indicate): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Length of Session:** \_\_1.5 hours \_\_ 3 hours(2 parts) \_\_4.5 hours(3 parts) |
| **Resource list (books, journal articles, other publications)** |
| **Speaker’s Introductory Bio and Photo:** *(Limit to 100 Words. Include Speaker Qualifications.)* |
| **Title of Session:** **Session Description:****Learning Outcomes:**By the end of the session the CTRS will be able to…(*Learner outcomes must be measurable.*)1.
2.

**Session Outline** *(Include time frames for each section of your presentation. Total session time must equal a minimum of 90 minutes)*1. Intro (10 minutes)

a. b.c. **NCTRC Job Analysis Area** (Check all that apply.) See NCTRC’s publication [here for more information.](https://www.nctrc.org/wp-content/uploads/2019/02/JobAnalysisReport.pdf) **\_\_\_** Foundational Knowledge (FKW)\_\_\_ Assessment Process (ASP)\_\_\_ Documentation (DOC)\_\_\_ Implementation (IMP)\_\_\_ Administration of TR/RT Programs (ADM)\_\_\_ Advancement of the Profession (ADV)**Instructional Method:** (Check all that apply.)**\_\_**Lecture \_\_Discussion \_\_Panel \_\_Interactive activities |
| **Under the guidance of the NJEPA-TRA Board of Directors and/or Education Committee are you willing to record this VIRTUAL learning opportunity?** \_\_Yes \_\_No |

**SUBMIT THIS COMPLETED APPLICATION IN MICROSOFT WORD FORMAT**

**AND EMAIL TO:**

education.njepatra@gmail.com