



**ILLINOIS NURSING HOME
ADMINISTRATORS ASSOCIATION**

RFP for Speakers – 2017 Application Form

- INHAA members are administrators and nurses working in Geriatric Long Term Care, DD Facilities, Assisted Living/Supportive Living/Independent Living Residences, and CCRCs. Please consider submitting several topics.
- Proposals may be submitted by: E-mail to sgardiner@inhaa.org; Fax: 708-248-8078; Phone: 708-800-6161; or Mail: P.O. Box 483, North Aurora, IL 60542

I - Session Title: _____

II - Provide approximately a 75- word narrative that describes your session. Session length will be 90 minutes 120 minutes.

III - List three learning objectives by completing the statement, "At the conclusion of this session, the participant should be able to:"

1. _____

2. _____

3. _____

IV – Speaker Information:

Name: _____ Title: _____

Organization/Employer: _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____ Fax: _____

E-Mail: _____

Educational Degree(s): _____ Major(s): _____ Year: _____

Institution: _____

50-word Bio or attach a resume:

INHAA is a nonprofit educational organization and is limited in its ability to give compensation for honorariums, except for transportation costs.

- My organization will sponsor the session therefore, INHAA will not incur any costs for me to speak.
- I will require that INHAA pay mileage or transportation costs.

Speaker's Requirements

1. Audio-visual: INHAA will arrange for a large presentation screen, LCD projector, podium and a regular microphone. Speakers are expected to bring their own computer for PowerPoints

Other audio-visual needs: _____ Lavalier Microphone _____ Internet or Wi-Fi connection

_____ audio hook-up for video _____ (Other)_____

2. Handouts: INHAA board members will assist in distributing handouts to attendees

_____ Speaker will handle reproducing and bringing handouts

_____ Reproducing handouts to be done by INHAA (need 30 days prior to presentation to copy)

Signature

Date