Sharing A Vision 2021
October 6-8, 2021

2021 REQUEST FOR PROPOSALS

The Sharing A Vision (SAV) Presenter Committee is requesting proposals for: Workshop Presentations and Innovation Showcases for the biennial conference on October 6-8, 2021 which will be held virtually.

Conference Theme: "Everyone Belongs: Creating Equitable and Inclusive Spaces for All"

Each Proposal is Required to: Acknowledge the conference theme and align with the principles in the **NAEYC's Advancing Equity in Early Childhood Education statement**.

TYPE OF PROPOSALS

- **Workshop Presentation Proposal Details:** All workshops will be 60 minutes in duration. The opportunity for a double session may be available.

- **Innovation Showcase Details:** (formerly Showcasing/ Creative Expressions Art Gallery) An opportunity to briefly highlight how your program or classroom has been innovative in meeting the needs of children, families, or staff, and share your positive outcomes. Applicants choose how to exhibit their work on a virtual platform (i.e., photos, video, slide show, PowerPoint, or other tech tools). Includes an opportunity to interact with conference participants.

DEADLINES

- **Deadline for Proposal Submissions:** February 28, 2021

- **Acceptance Date:** March 31, 2021 (Only the lead presenter will be notified of conference acceptance.)

- **Deadline for Presentation Handouts for the Guidebook App:** September 3, 2021

PRESENTER INFORMATION

- **Workshop Presenter Information:** Each presentation and innovation showcase can have up to three total presenters (one lead presenter and two co-presenters).

- **Complimentary Main Conference Registration:** All presenters and showcase representatives must register for the conference. Each accepted application will receive one complimentary main conference registration for one PERSON ONLY. All other presenters and showcase representatives must pay the registration fee to attend the conference.

HOW TO SUBMIT YOUR REQUEST FOR PROPOSAL APPLICATION

- Click the appropriate link below for workshop presentation or innovation showcase to submit your application.

- You can submit for both a workshop presentation and an innovation showcase or more than one of the same. You must submit one at a time and then log back in and submit another if you choose to.

- If you have any questions during this process, contact Deb at ISU Conference Services at **dscowde@ilstu.edu**.

- Once you start your application you have 30 minutes to complete it or the form will timeout. Make sure you have all the below information ready before you begin.

- When filling out the form, if you receive an error message for missing a required field, scroll down to that field and complete. DO NOT use the back button or your information will be lost. After you get to your order details screen, you MUST scroll to the bottom of the screen and hit SUBMIT. You will know when you have submitted the form when you receive a confirmation in green.

- Each person needs to create their own account. Do not share your login information with another person or it will overwrite your submission.

COMPLETE THE REQUEST FOR PROPOSALS FORMS

Click here to complete the Workshop Presentation Form or visit bit.ly/sav21RFPWorkshop.

Click here to complete the Innovation Showcase Form or visit bit.ly/sav21RFPInnovation.

Before you submit your online form, you need to know if you are submitting for a Workshop Presentation or an Innovation Showcase. Please see the following pages to view the required content for each type of proposal.

WORKSHOP PRESENTATION RFP APPLICATION INFORMATION

All fields with a red asterisk (*) are required.

LEAD PRESENTER

*First Name:_____   *Last Name:_____

Credentials:_____   *Employer:_____

*Email Address:_____   *Phone:_____

*Address (preferred address for receiving communications):_____

*City:_____   *State:_____   *Zip Code:_____

*Biography for Lead Presenter (limited to 75 words):

CO-PRESENTER INFORMATION (IF ANY)

Co-Presenter 1

First Name:_____   Last Name:_____

Credentials:_____   Employer:_____

Email Address:_____   Phone:_____

Address (preferred address for receiving communications):_____

City:_____   State:_____   Zip Code:_____

Biography for Co-Presenter (limited to 75 words):

Co-Presenter 2

First Name:_____   Last Name:_____

Credentials:_____   Employer:_____

Email Address:_____   Phone:_____

Address (preferred address for receiving communications):_____

City:_____   State:_____   Zip Code:_____

Biography for Co-Presenter (limited to 75 words):

PRESENTATION INFORMATION

*Session Title (Subject to editing):_____

*Session Description for Brochure (limited to 60 words; subject to editing):

*Clearly state 2-4 objectives of your presentation (i.e., Participants will….):

*Describe how your presentation will be relevant to conference participants (families with young children and professionals working with young children ages 0-8):

*Describe (in 50-100 words) how you will incorporate adult learning principles to deliver an interactive and educational session. A glossary of adult learning principles can be found **here**.

**Have you done this presentation before?
- ❑ YES, If so, where? _____   ❑ NO

*Please select the age range for your presentation:
- ❑ 0-3   ❑ 0-5   ❑ 0-8   ❑ 3-5   ❑ 3-8   ❑ 5-8

*Please select the level your presentation is targeted for:
- ❑ Introductory/Awareness: General information, participants do not need background information to attend.
- ❑ Intermediate/Application: Participants have some background knowledge before attending. Additional information is given to help participants apply the knowledge and begin to problem-solve.
- ❑ Advanced/Mastery: Participants have a strong knowledge of the topic and the session is designed to integrate current knowledge and skills with new information to analyze or create plans for further growth or implementation.

*Please indicate how your presentation addresses the conference theme of "Everyone Belongs: Creating Equitable and Inclusive Spaces for All" (50-100 words):

*Please indicate the appropriate strand to which this presentation aligns:
Click here for all stand definitions. The strands are aligned to DEC Recommended Practices.

❑ Leadership	❑ Environment	❑ Instruction	❑ Teaming and Collaboration
❑ Assessment	❑ Family	❑ Interaction	❑ Transition

*Please indicate the audience to whom your presentation is targeted. Check all that apply:

❑ Administrator	❑ Family Educator, Home Visitor	❑ Teacher Assistant
❑ Early Interventions	❑ Related Service Provider	❑ Instructional Coach or PD provider
❑ Family Member	❑ Teacher	❑ Other:_____

*Which of the early intervention principles does this session support? How does this session address the needs of children, birth to three and their families? (Please check all that apply):

❑ N/A, this session DOES NOT address early intervention or the 0-3 population

❑ The primary goal of EI is to support families in promoting their child's optimal development and to facilitate the child's participation in family and community activities.

❑ The focus of EI is to encourage the active participation of families in the therapeutic process by embedding intervention strategies into family routines. It is the parents who provide the real early intervention by creatively adapting their childcare methods to facilitate the development of their child, while balancing the needs of the rest of their family.

❑ EI requires a collaborative relationship between families and providers, with equal participation by all those involved in the process. An on-going parent-professional dialogue is needed to develop implement, monitor, and modify therapeutic activities.

❑ Intervention must be linked to specific goals that are family-centered, functional, and measurable. Intervention strategies should focus on facilitating social interaction, exploration, and autonomy.

❑ Intervention should be integrated into a comprehensive plan that encourages transdisciplinary activities and avoids unnecessary duplication of services. The plan should be built around family routines, with written home activity programs to encourage family participation in therapeutic activities on a daily basis.

❑ Intervention should be monitored periodically to assure that the strategies implemented are successful in achieving outcomes.

❑ Children and their families in the Early Intervention System deserve to have services of the highest quality possible. High standards will be set for the training and credentialing of administrative and intervention staff. Training, supervision, and technology will be focused to achieve excellence.

ADDITIONAL INFORMATION

Accommodations - If you have a disability that requires accommodations, please describe the necessary accommodations:

***Technology -** SAV will provide tech support for recordings, create a how-to video and tip sheet for presenters, and create a private YouTube channel to store recordings.

❑ Yes, I understand.

***Handouts -** We strongly encourage you to have electronic handouts. Upon acceptance, you will receive more information on a due date and procedures. I grant permission to Sharing A Vision to post my presentation handouts on the conference website and conference app.

❑ Yes, I grant SAV permission.   ❑ No, I DO NOT grant SAV permission.

***Presenter Sales -** Sharing A Vision will provide the opportunity for the sale of books, products, etc. Promotion of materials during the presentation is prohibited. If you have items to sell, are you interested in this opportunity?

❑ YES   ❑ NO   ❑ N/A

Additional Notes - Use this field to tell us any other important information regarding your presentation:

***Conflict of Interest -** It is agreed the presenter will avoid recommending or mentioning any specific product by its trade name. When reference is made to a specific product by trade name, the presenter will list competitive products as well.

❑ Yes, I understand.

INNOVATION SHOWCASE RFP APPLICATION INFORMATION

LEAD SHOWCASE REPRESENTATIVE

*First Name:_____   *Last Name:_____

Credentials:_____   *Program:_____

*Title/Position: _____

*Email Address:_____   *Phone:_____

*Address (preferred address for receiving communications):_____

*City:_____   *State:_____   *Zip Code:_____

*Program Setting/Type: (ex: Early Childhood Special Education, Early Intervention, etc.):_____

*Program Description (limited to 75 words):

OTHER SHOWCASE REPRESENTATIVES (IF ANY)

Showcase Representative #2

First Name:_____   Last Name:_____

Credentials:_____   Program:_____

Title/Position: _____

Email Address:_____   Phone:_____

Address (preferred address for receiving communications):_____

City:_____   State:_____   Zip Code:_____

Showcase Representative #3

First Name:_____   Last Name:_____

Credentials:_____   Program:_____

Title/Position: _____

Email Address:_____   Phone:_____

Address (preferred address for receiving communications):_____

City:_____   State:_____   Zip Code:_____

INNOVATION SHOWCASE INFORMATION

*Innovation Showcase Title:_____

*Showcase Description:

*Showcase Category (Choose One):

❑ Early Intervention
❑ Staff Development
❑ Technology
❑ Transition from EI to EC
❑ Multiculturalism
❑ Nature

❑ Assessment
❑ Collaboration with Community Partners
❑ Social/Emotional Development
❑ Special Education Instruction
❑ Art
❑ Physical Development & Health

❑ Family Engagement
❑ Science
❑ Diversity, Equity, Inclusion
❑ Project Approach
❑ Math
❑ Other:_____

*Showcase Objective(s) (i.e., Participants will…):

*Target Audience (Check all that apply):

❑ Administrator
❑ Early Interventionist
❑ Family Member

❑ Family Educator, Home Visitor
❑ Related Service Provider
❑ Teacher

❑ Teacher Assistant
❑ Instructional Coach or PD provider
❑ Other:_____

*Please describe how your innovation showcase addresses the conference theme of "Everyone Belongs: Creating Equitable and Inclusive Spaces for All" (50-100 words):

ADDITIONAL INFORMATION

Accommodations - If you have a disability that requires accommodations, please describe the necessary accommodations:

Additional Notes - Use this field to tell us any other important information regarding your showcase:

***Conflict of Interest -** It is agreed the presenter will avoid recommending or mentioning any specific product by its trade name. When reference is made to a specific product by trade name, the presenter will list competitive products as well.
❑ Yes, I understand.

***Materials -** I grant permission to Sharing A Vision to share my showcase exhibit on the conference website and conference app:
❑ Yes, I grant SAV permission.   ❑ No, I DO NOT grant SAV permission.