**2020 National Health Care**

**For The Homeless Council**

**Conference & Policy Symposium**

May 11 - 14 | Phoenix, AZ

*E*Quality = Equity + Quality

**Call for Proposals: Submission Form**

The following form follows the same steps for the electronic proposal submission. If you use this form for planning, you must submit the electronic proposal [here](http://www.cvent.com/c/abstracts/b2dc3beb-0ed6-4b9f-a4d1-6c5b2da5630f)

**Presenter’s Information**

1. **Presenter’s Details**
	1. **\*Name:** *Insert here*
	2. **\*Credentials (e.g. N/A, BA, MSW):** *Insert here*
	3. **\*Email Address:** *Insert here*
	4. **\*Company:** *Insert here*
	5. **\*City:** *Insert here*
	6. **\*State:** *Insert here*
	7. **\*Ethnicity:** *Insert here*
	8. **\*Race:** *Insert here*
	9. **\*Sexual Orientation:** *Insert here*
	10. **\*Gender Identity:** *Insert here*
	11. **Biography (optional):**
2. **Co-Presenter’s Details (if applicable)**
	1. **\*Name:** *Insert here*
	2. **\*Credentials (e.g. N/A, BA, MSW):** *Insert here*
	3. **\*Email Address:** *Insert here*
	4. **\*Company:** *Insert here*
	5. **\*City:** *Insert here*
	6. **\*State:** *Insert here*
	7. **\*Ethnicity:** *Insert here*
	8. **\*Race:** *Insert here*
	9. **\*Sexual Orientation:** *Insert here*
	10. **\*Gender Identity:** *Insert here*
	11. **Biography (optional):**
3. **Second Co-Author’s Details (if applicable)**
	1. **\*Name:** *Insert here*
	2. **\*Credentials (e.g. N/A, BA, MSW):** *Insert here*
	3. **\*Email Address:** *Insert here*
	4. **\*Company:** *Insert here*
	5. **\*City:** *Insert here*
	6. **\*State:** *Insert here*
	7. **\*Ethnicity:** *Insert here*
	8. **\*Race:** *Insert here*
	9. **\*Sexual Orientation:** *Insert here*
	10. **\*Gender Identity:** *Insert here*
	11. **Biography (optional):**

**\*Required information**

**Submission Information**

1. **Submission’s Title (100 CHARACTER LIMIT):** *Insert Here*
2. **Learning Objectives - 3 Measurable Objectives Recommended** (Example: After participating in this session, attendees will be able to identify three barriers to care for unaccompanied homeless youth.)
	* + 1.
			2.
			3.
3. **Primary Topic Track – Select One** (Identify the track most closely related to your submission – see online CFP for definitions of tracks):
	* 1. Direct Care
		2. Policy & Advocacy
		3. Program Operations & Innovation
		4. Evidence & Evaluation
4. **Presentation Type – Select One:**
	* 1. Workshop Presentation (75 mins)
		2. Oral Presentation (30 mins)
		3. Poster Presentation
5. **Option to submit your abstract in a document file (PDF, Word, ect.)**
6. **Submission Summary**

This will be used in the conference program if your proposal is accepted. Please use 3rd person without identifying information – e.g. “the organization” or “the clinic” (LIMIT 150 WORDS): *Insert here*

1. **Details**

**Please explain the background of your abstract, or if you DID NOT attach a file, please submit your abstract here – again, please avoid identifying information.** Include the history behind your abstract, consider stating how and why is was developed, as well as a quick overview of what you propose to cover and projected outcomes (LIMIT TO 500 WORDS): *Insert here*