***MCA 2007 Conference***

***‘Counseling for All Seasons of Life’***

November 8—11, 2007

## Amway Grand Plaza Hotel  Grand Rapids, Michigan

### *Request for Proposal & Presenter Profile Form*

#### Presenter Program Proposal Form

Please Type or Print Clearly. *Program Proposal Forms are due NO LATER THAN Friday, June 15th, 2007.*

Program Title

**Program Format *(Please Check One)***

 *PRE-CONFERENCE* (3 hours)  *PRE-CONFERENCE* (6 hours)  1 hour  90 min.

Presenter Profile/Information\*

First Name Last Name

Address

City State Postal Code

Email

Phone Number ( ) - Fax Number( ) -

\*NOTE: Please include a resume with this profile so that NBCC and State CEUs can be offered. (See below for additional presenter profile information.)

**Program Goals** *(Upon completion of this session participants will…)*

1)

2)

3)

**Program Description** *(State as you would like it printed on the program – 50 words or fewer)*

###### Equipment

At no charge, MCA will provide an overhead projector, flip chart, and screen (see check boxes below). Please contact the Amway Grand Plaza at 616/776-6400 and mention MCA ‘07 for any other media needs. *NOTE: The cost any additional equipment will be the responsibility of the presenter.*

Please check your media needs:  Overhead projector  Screen  Flipchart

**MCA Divisions** *(Please check the division(s)for whom your content session would be appropriate)*

 **AMSC** *Assn. of Mich. School Counselors*

 **MAADA** *Mich. Assn. for Adult Development & Aging*

 **MACC** *Mich. Assn. for Clinical Counselors*

 **MACES** *Mich. Assn. for Counselor Education & Supervision*

 **MAHEAD** *Mich. Assn. for Humanistic Education & Development*

 **MAMCD** *Mich. Assn. for Multicultural Counseling and Development*

 **MAMEG** *Mich. Assn. for Measurement & Evaluation in Guidance*

 **MAMFC** *Mich. Assn. for Marriage & Family Counseling*

 **MARCA** *Mich. American Rehabilitation Counseling Assn.*

 **MASERVIC** *Mich. Assn. for Spiritual, Ethical & Religious Values in Counseling*

 **MASGW** *Mich. Assn. for Specialists in Group Work*

 **MCCA** *Mich. College Counseling Assn.*

 **MCDA** *Mich. Career Development Assn.*

 **MECA** *Mich. Employment Counselors Assn.*

 **MMHCA** *Mich. Mental Health Counselors Assn.*

###### Presenter Profile Information

*Employment:* Current Position

Name of Employer Number of Years

Address of Employer

*Education:* Undergraduate Degree (Major/University) Year

Graduate Degree (Major/University) Year

Graduate Degree (Major/University) Year

License(s)/Certificates

Special training relevant to the topic being presented *(optional)*

Professional Affiliations and Awards

###### Presenter Agreement

By my signature below, I certify that the above information is accurate to the best of my knowledge and the information which I present will be either original material or I will secure appropriate copyright permission.

Signature Date

*The Michigan Counseling Association does not discriminate on the basis of race, gender, age, religion, creed, sexual/affectional orientation, disability or ethnic origin.*

#### Additional Information

Mail Completed RFP/Profile Form to ***MCA Headquarters***, *Attn: Conference 2007,* 120 North Washington Square, Suite 110 A, Lansing, MI  48933. For additional information, please contact MCA 2007 Conference Chair: Pat Faircloth at **solace1@comcast.net**. Or visit MCA’s website…www.michigancounselingassociation.com