

CALL FOR PAPERS

STATEWIDE CONFERENCE ON EDUCATION OF THE DEAF/HH

“Student Success: Achieving New Heights”

July 22-24, 2008

Moody Gardens Hotel

Galveston, Texas

The thirteenth biennial **Texas Statewide Conference on Education of the Deaf or Hard of Hearing** invites proposals for papers that address a wide variety of issues in the education of students who are deaf or hard of hearing. Presentations reflecting the conference theme, “*Student Success: Achieving New Heights*”, will be considered for concurrent sessions.

Topics Topics include accessing the general education curriculum; teaching reading/English/language arts, mathematics, science, and social studies; providing for the education of infants and preschoolers; working with low-functioning deaf; and parenting children who are deaf or hard of hearing. Other strand areas include deaf studies and culture, speech development, administrative and legal issues, sign communication and interpreting, audiology, transition, and assessment of children who are deaf or hard of hearing. Training sessions are needed in the use of amplification equipment, appropriate software, and technology.

Format **Concurrent sessions** are 1½ hours long and include time for introductions, discussion, questions and evaluations. Longer sessions in 1½ hour increments (3 hours, 4½ hours, and 6 hours) will be considered. Poster sessions will be offered in Exhibition Hall.

Proposal Submit an **original** and **three copies** of each of the following: (1) call for papers application, including abstract and additional information pages, (2) co-presenter information for each additional presenter, (3) a **biographical sketch** for **each** presenter, and (4) a **resume** for **each** presenter.

Application Deadline Completed applications must be postmarked by Thursday, January 31, 2008. Acceptance notifications will be **sent to the main applicant only** by February 29, 2008.

Fees & expenses Presenters selected from the Call for Papers will not be paid an honorarium or be reimbursed for expenses.

Registration RDSPD/TSD/DARS personnel are asked to pay full registration as a financial support for the conference. Presenters who are not affiliated with RDSPD, TSD, or DARS may attend other sessions on the day of their presentation without paying registration. Attendance on multiple days, at meal functions, or requesting CEU credit will require registration.

Media Every effort will be made to meet the requests for media equipment. **Be sure to indicate your needs on the application.** Please help keep the conference costs down by requesting only essential equipment. Changes in equipment requests will NOT be accepted after May 16, 2008.

Copies **Presenters are responsible for providing handouts** for his or her presentation. Duplication will not be available at the conference. Speakers need to provide an electronic copy (NOT Power Point) of their handouts in pdf format.

Questions and Information Lisa Stewart, Speakers Committee Chair
Fort Worth ISD
100 N. University Drive, Ste 254B
Fort Worth, Texas 76107
E-mail: lstew@fortworthisd.net
Phone: (817) 871-2920
Fax: (817) 871-2393

DiAnne Allison, Speakers Committee Co-Chair
Denton ISD
1205 University Drive
Denton, Texas 76201
E-mail: dallison@dentonisd.org
Phone: (940) 369-4084
Fax: (940) 369-4969

Dan Diffie, Speakers Committee Co-Chair
Education Service Center
3001 North Freeway
Fort Worth, Texas 76106
E-mail: ddiffie@esc11.net
Phone: (817) 740-7580
Fax: (817) 740-3684

STATEWIDE CONFERENCE ON EDUCATION OF THE DEAF/HH
CALL FOR PAPERS APPLICATION
“Student Success: Achieving New Heights”

July 22-24, 2008

Moody Gardens Hotel

Galveston, Texas

Please mail 1 original and 3 copies of the application with all supporting documents to:
Education Service Center Region XI
Attn: Dan Diffie
3001 North Freeway
Fort Worth, Texas 76106

This application and additional information about the *Statewide Conference on the Education of the Deaf/Hard of Hearing* is available on the Texas Education Agency website: <http://www.tea.state.tx.us/deaf/>

PLEASE TYPE OR PRINT – SESSION INFORMATION

If there is more than one presenter, please ask each co-presenter to complete the co-presenter information page. Each person is asked to submit the biographical information and a 1-2 page resume.

NAME OF APPLICANT: _____

Agency/Organization: _____

Position/Title: _____

Street Address: _____

City: _____

Telephone (W): _____ (H): _____ (Fax): _____

E-mail Address: _____

Summer phone number and address (if different from above): _____

TITLE OF PRESENTATION: _____

Do you want a conference registration form? _____ yes _____ no

Communication Needs:

Sign language interpreters will be provided for all sessions. Please indicate any additional communication needs that you may have below:

Moderator Recommendations: (If possible, please provide the name, address and phone number of a person who would be willing to moderate this session.)

CO-PRESENTER INFORMATION
(PLEASE COMPLETE ONE FORM FOR EACH ADDITIONAL CO-PRESENTER)

Name of Co-Presenter: _____

Agency/Organization: _____

Position/Title: _____

Street address (PO Box): _____

City: _____ State: _____ Zip: _____

Telephone (W): _____ (H): _____ (Fax): _____

E-mail Address: _____

Summer phone number and address (if different from above): _____

Title of Presentation: _____

Name of Main Applicant Presenter: _____

For **EACH** presenter (MAIN PRESENTER AND ALL CO-PRESENTERS):
PLEASE INCLUDE THE FOLLOWING INFORMATION WITH YOUR APPLICATION.

- I. **BIOGRAPHICAL INFORMATION:** Please write a **brief** biographical sketch (25 words or less) that can be printed in the conference program.

- II. **RESUME:** Please enclose an abbreviated copy of your resume indicating relevant information for this audience. An extensive list of previous presentations, articles and publications is **not** required. Attached resume or vita should not exceed two pages.

PRESENTATION ABSTRACT

Please provide the following information about the proposed paper.

TITLE OF PRESENTATION: _____

PROGRAM DESCRIPTION: **(25-30 words or less, as you wish it to appear in the program)**

I. OBJECTIVES (What do you want the audience to learn?)

II. CONTENT (What material is to be presented?)

III. METHOD (S) OF PRESENTING (How are you going to present this information?)

ADDITIONAL PRESENTATION INFORMATION

Title of Presentation: _____

Topic Category:

- | | |
|---|---|
| <input type="checkbox"/> accessing the general ed. curriculum | <input type="checkbox"/> deaf studies/deaf culture |
| <input type="checkbox"/> reading/English/language arts | <input type="checkbox"/> inclusion |
| <input type="checkbox"/> mathematics | <input type="checkbox"/> interpreting |
| <input type="checkbox"/> science | <input type="checkbox"/> legal issues |
| <input type="checkbox"/> social studies | <input type="checkbox"/> low-functioning deaf children |
| <input type="checkbox"/> administrative issues | <input type="checkbox"/> parenting children with hearing loss |
| <input type="checkbox"/> audiology | <input type="checkbox"/> parent/infant education |
| <input type="checkbox"/> assessment | <input type="checkbox"/> preschool/early childhood intervention |
| <input type="checkbox"/> behavior/behavior improvement | <input type="checkbox"/> speech-language development |
| <input type="checkbox"/> bilingual/bicultural issues | <input type="checkbox"/> support services in deaf education |
| <input type="checkbox"/> communication | <input type="checkbox"/> technology/adaptive/assistive devices |
| <input type="checkbox"/> computer technology in the classroom | <input type="checkbox"/> transition |
| <input type="checkbox"/> other: _____ | <input type="checkbox"/> other: _____ |
-

Level the topic will cover:

- | | |
|--|---|
| <input type="checkbox"/> parent/infant | <input type="checkbox"/> multi-handicapped |
| <input type="checkbox"/> early childhood | <input type="checkbox"/> multi-level |
| <input type="checkbox"/> elementary | <input type="checkbox"/> postsecondary |
| <input type="checkbox"/> secondary | <input type="checkbox"/> other (specify): _____ |
-

Intended audience:

- | | |
|---|---|
| <input type="checkbox"/> administrators | <input type="checkbox"/> paraprofessionals |
| <input type="checkbox"/> audiologists | <input type="checkbox"/> speech-language pathologists |
| <input type="checkbox"/> counselors | <input type="checkbox"/> teacher educators |
| <input type="checkbox"/> diagnosticians | <input type="checkbox"/> teachers - elementary |
| <input type="checkbox"/> interpreters | <input type="checkbox"/> teachers - secondary |
| <input type="checkbox"/> parents | <input type="checkbox"/> others: _____ |
-

Equipment requested: [Note: No changes in media requests will be accepted after May 16, 2008.]

- | | |
|--|---|
| <input type="checkbox"/> overhead projector | <input type="checkbox"/> VHS videotape player |
| <input type="checkbox"/> LCD (Power Point) projector | <input type="checkbox"/> other (specify): _____ |

Please do not request a VCR or LCD projector unless it is critical to your presentation. **You must provide your own computer, connectors, cords, and/or special equipment.**

I (WE) understand that if my (our) Call for Papers application is accepted by the Texas Statewide Conference on Education of the Deaf and Hard of Hearing, I (we) will not receive an honorarium or reimbursement for expenses from the Conference. Appropriate registration and meal fees will be my (our) responsibility if I (we) attend other days, request CEUs, or dine at the general session.

Signature of Applicant: _____