

2025 Consumer Voice Conference Session Proposals

Instructions

Thank you for your interest in presenting during the 2025 Consumer Voice Conference. We are looking for proposals for 75 minute workshops. Prior to completing your submission, please review the 2025 Call for Proposals document and/or print a PDF version of the proposal questions to review since you will not be able to save your activity and return at a later date.

The deadline for proposals is **May 2, 2025. We will not consider late or incomplete submissions. You may submit more than one proposal. If you have questions, please contact info@theconsumervoice.org.**

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Session Title and Format

* 1. Consumer Voice will be hosting an in-person conference on November 3 to 6, 2025 in Arlington, Virginia. Note that some workshops may be live-streamed.

I give my permission to have the session live-streamed

If the format and presentation method you are using will make it difficult to live-stream, please explain here

* 2. Session Title

* 3. Session Format - Check all that apply.

Lecture with discussion

Case studies

Panel

Point/Counter Point (debate)

Facilitated discussion

Other

If "Other" please describe:

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Presenter(s) Information

Please complete contact information for each presenter.

* 4. Lead Presenter

Name	<input type="text"/>
Title	<input type="text"/>
Organization/Agency	<input type="text"/>
Address	<input type="text"/>
City	<input type="text"/>
State	<input type="text" value="-- select state --"/>
ZIP/Postal Code	<input type="text"/>
Degree	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

* 5. Professional Work Experience in Aging/Disability Rights (lead presenter)

- 0-2 years 6-10 years
 3-5 years 11 or more years

* 6. Provide a one-paragraph bio for the lead presenter. Bios are included in the conference app and online.

* 10. Co-Presenter

NOTE: If you do not have multiple presenters enter "N/A" in order to proceed with the submission.

Name	<input type="text"/>
Title	<input type="text"/>
Organization/Agency	<input type="text"/>
Address	<input type="text"/>
City	<input type="text"/>
State	<input type="text" value="-- select state --"/>
ZIP/Postal Code	<input type="text"/>
Degree	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

* 11. Professional Work Experience in Aging/Disability Rights (co-presenter)

- | | |
|----------------------------------|---|
| <input type="radio"/> 0-2 years | <input type="radio"/> 11 or more years |
| <input type="radio"/> 3-5 years | <input type="radio"/> No co-presenter so not applicable |
| <input type="radio"/> 6-10 years | |

* 12. Provide a one-paragraph bio for the co-presenter. Bios are included in the conference app and online. Enter "N/A" if there is not a co-presenter.

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Session Details

* 13. Session Description

This description will be included in the conference program. Please identify the topics the session will cover and the type of advocate that will receive the most benefit from attending. Keep in mind attendees will have several workshop options to select from for each time period, and the manner in which you describe your workshop will draw attendees to your session. Creativity and humor are encouraged. Please limit your paragraph to 75 words or less.

* 14. Session Objectives

Identify at least two objectives for your session (e.g., knowledge or skills attendees will gain from your session).

Objective 1:

Objective 2:

Objective 3:

* 15. The issues in your session are applicable in (check all that apply):

Assisted Living

Nursing Homes

Home and Community Based Services (HCBS)

* 16. Briefly describe how your session will include innovative and concrete strategies for long-term care advocacy.

* 17. How will attendees be able to utilize information from your session to advocate for quality long-term care?

* 18. Briefly describe the "take-aways" your session will provide.

* 19. Will you be requiring access to the internet during your session?

- Yes
 No
 Maybe

Please describe your plans for using the internet (e.g. show a website, live demo, play a video, etc.)

* 20. Do you need special accommodations in order to present? (e.g., you use a wheelchair, your presentation is interactive or involves other technologies than just Powerpoint slides, etc.)

- Yes
 No

Please describe.

21. Is there any additional information you would like to provide?

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Presenter Requirements

* 22. Review the Presenter Requirements in the Session Proposal document and check the box below if you understand and agree to the requirements.

Registration reminder: Presenters must register and pay applicable conference registration fees. Sessions will be withdrawn and replaced if presenters have not registered and paid by September 25th.

I understand and agree to the presenter requirements.

Thank you for submitting your proposal for the 2025 Consumer Voice Conference. Presenters will be informed of our decision by June 16, 2025. Please contact info@theconsumervoice.org with questions.