**2023 Call for Proposals – Collective Transformation**

**End Domestic Abuse Wisconsin’s Statewide Conference**

**November 27-29, 2023**

**Monona Terrace & Convention Center, Madison, WI**

**Submission Instructions:**

Complete the following Workshop Information sheet and return via email to statewideconference@endabusewi.org; or mail to:

Gricel Santiago-Rivera

End Domestic Abuse Wisconsin

1400 E Washington Ave., Ste. 227

Madison, WI 53703

**Submit by May 22, 2023 for priority consideration.**

**Deadline is June 5, 2023.**

For more information visit: <https://endabusewi.org/events/5-year-conference>

**Workshop Title:** Click here to enter text.

**Workshop Description:** (This description will be used by the committee to evaluate if your proposed workshop fits our needs and conference goals. Please include a summary of the presentation content, a description of the presentation’s format (lecture/panel, case studies, videos, hands-on activities, group discussions, etc.) and other information you feel may be useful in evaluating your proposal.)

Click here to enter text.

**Learning Outcomes:** (2-3 learning outcomes you anticipate for participants who attend your presentation.)

Click here to enter text.

**Workshop Summary:** (For Conference materials/marketing purposes. Limit your description to one paragraph of no more than 200 words.)

Click here to enter text.

**Length of Workshop Session:**

1 hour

90 minutes

3 hours

**Workshops Content Level:**

Beginner

Intermediate

Advanced

Appropriate for all attendees

**Workshop’s Intended Audience:** (check all that apply)

Victims/Survivors

DV/SA Advocates/Personnel

Prevention Staff

Legal (attorneys, guardians ad litem, prosecutors, etc.)

Medical Professionals (doctors, SANE nurses, nurse practitioners)

Social Workers/Therapists/Counselors (including CPS/Custody Evaluators)

Law Enforcement

**Days/Times available to present workshop:** (Conference runs from Monday, November 27, 2023 at 1:00 p.m. to Wednesday, November 29, 2023, at 12:00 p.m.)

Click here to enter text.

**Primary Presenter:** (will serve as the contact person)Click here to enter text.

**Credentials (BA, MS, MSW, PhD, etc.):** Click here to enter text.

**Job Title:** Click here to enter text.

**Employer:** Click here to enter text.

**Email Address:** Click here to enter text.

**Mailing Address:** Click here to enter text.

**City, State, Zip Code:** Click here to enter text.

**Work Phone Number:** Click here to enter text.

**Additional Presenter (if needed/known):** Click here to enter text.

**Credentials (BA, MS, MSW, PhD, etc.):** Click here to enter text.

**Job Title:** Click here to enter text.

**Employer:** Click here to enter text.

**Email Address:** Click here to enter text.

**Mailing Address:** Click here to enter text.

**City, State, Zip Code:** Click here to enter text.

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