New York Public Welfare Association Proposal for 2012 Summer Conference Workshop

Contact Person Na	ame & Title:				
Organization:					
Address:					
Email:	Phone:	Fax:			
Suggested Title	:				
Also, attached is a	Summary of the Prese	ntation for review by t	he selection comm	ittee.	
All Presenters (names, title, agency,	address, phone, en	nail address)		
Type & Length	of Presentation (pl	ease check all that		□Prefer 90 I	Minute Session
☐ CLE Legal Se	ession [Other (please des	scribe)		
Local DSS Com	nmissioner Approv	al (required for any	local DSS staff to	o present)	
☐ Approval rec	eived \square	Request for approv	/al is pending	J No LDSS	staff presenting (N/A)
Equipment Nee	ded				
☐ Flip Chart ☐ I will bring lap	☐ Screen 1 top and LCD projecto	☐ Internet Access (or for PowerPoint (N		•	le for costs)
Program Area (please check all that	apply)			
☐ Adult Services☐ Child Support☐ Children's Ser	☐ En	ny Care nployment nancial Assistance	☐ Food Stamps☐ HEAP☐ Housing		☐ Medicaid
Administrative A	Area (please check a	all that apply)			
☐ Fiscal ☐ Legal	☐ Manageme		☐ Staff Develo	•	☐ Technology _eadership Network

Please submit your proposal to info@nypwa.org or fax to 518-465-5633 by March 31, 2012. For more information, please contact Beth Keitel, NYPWA Conference Coordinator, at <u>518-465-9305</u>. NYPWA Summer Conference July 8-11, 2012 Saratoga Hilton Hotel