Call for Posters -

NCOTA Fall Conference 2021

*“Embracing the Journey, Anchored in Knowledge”*

October 15-17, 2020

The New Bern Riverfront Convention Center

New Bern, North Carolina

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**North Carolina Occupational Therapy Association**

**PO Box 20432, Raleigh, NC 27619-0432**

[**NCOTAConference@gmail.com**](mailto:NCOTAConference@gmail.com)

[**www.ncota.org**](http://www.ncota.org)

**919-785-9700 Fax 919-771-0115**

Submission Deadline – Friday, August 27, 2021

# Poster Session: Saturday, October 16, 2021 from 11:15-12:00

# Submission Deadline – Friday, August 27, 2021

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| **Presenter Information** |

The **primary presenter** is the only person to whom NCOTA will send subsequent communication regarding acceptance of the proposal and onsite logistics. Communications will be sent via email. Any change in email address should be reported promptly to [**NCOTAConference@gmail.com**](mailto:NCOTAConference@gmail.com) to ensure that communication between NCOTA and the primary presenter is uninterrupted. Please complete electronically (fields expand to allow space to complete).

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| **Primary Presenter** | | | | | |
| Name and Credentials |  | | | | |
| Affiliation or Employer |  | | | | |
| Mailing Address |  | | | | |
| Preferred Phone |  | | | | |
| E-mail Address |  | | | | |
|  |  |  |  |  |  | |
| NCOTA member? |  | Yes |  | No |  | |

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| **Additional Presenter** | | | | | |
| Name and Credentials |  | | | | |
| Affiliation or Employer |  | | | | |
| Mailing Address |  | | | | |
| Preferred Phone |  | | | | |
| E-mail Address |  | | | | |
|  |  |  |  |  |  | |
| NCOTA member? |  | Yes |  | No |  | |

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| --- | --- | --- | --- | --- | --- |
| **Additional Presenter** | | | | | |
| Name and Credentials |  | | | | |
| Affiliation or Employer |  | | | | |
| Mailing Address |  | | | | |
| Preferred Phone |  | | | | |
| E-mail Address |  | | | | |
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| NCOTA member? |  | Yes |  | No |  | |

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| **General Poster Information** |

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| **Poster Title:** |  |
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**Focus** **Area:** *Check at least one Special Interest Section. If more than one applies, indicate 1st and 2nd choices.*

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|  |  | Children & Youth |  | Home &Community Health |
|  |  | Assistive Technology |  | Mental Health |
|  |  | Education/Research/Fieldwork |  | Leadership & Administration |
|  |  | Physical Disabilities |  | Geriatrics |
|  |  | General |  | Student Focused |

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| **Target Audience:** |  | **OT** |  | **Educator / Fieldwork Educator** |
|  |  | **OTA** |  | **Student** |

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|  | **Novice/Entry Level** |  | **Intermediate** |  | **Advanced** |

**Level of**

**Poster:**

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| **Poster Objectives** | | Summarize the **major points** of your poster and **describe** how this topic will advance either the practice/professional development of the participant or the field of occupational therapy. |
| Learning Objective 1 | |
| Learning Objective 2 | |

A poster is a scholarly graphic presentation of the author’s report or research. Please carefully and thoughtfully illustrate findings by displaying graphs, photos, diagrams, and a small amount of text on the poster. Be sure to include citations. During the poster session, many presenters find it helpful to give a brief introduction to the poster content, and then allow the remainder of the time for more in-depth discussions.

**Poster Size & Design Tips:** Posters should be submitted in digital format. Lettering should be bold, large font size (20–24-point font) on white, pale yellow or cream-colored background. The use of color is fine, but be cautious to use good visual contrast. Use 1-inch margins. Avoid use of fancy fonts. Use uppercase and lowercase letters. Simple serif fonts such as “Calibri” and “Arial” are easier to read than serif fonts such as “Geneva.” There are many free template for posters available online (www.omnipress.com), or simple use a PowerPoint slide and adjust the size settings.

**Poster Presentation Requirement:** Should the Conference be held in-person, presenters will be given a time to speak briefly about their poster (3-5 minutes) on stage with digital poster displayed – OR a voice-over recording may be played. Each poster will be uploaded digitally to the NCOTA Virtual Conference Platform as well. Should the Conference be held virtually, all posters will be required to submit a voice-over of their poster. Options for audio include: submitting an audio file recorded on your phone; recording directly onto a power point slide using an external/built-in microphone on your computer; or downloading and using the AUDACITY software to record. Please check the quality of the recording prior to sending.

**PDF Requirement:** Please also submit a PDF of your poster to give attendees. Include your contact information. This PDF will provide justification for continuing education credit if a practitioner is audited. Please make sure it is sent in a .pdf .ppt, .pptx  or .pub format.

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| **Conflict of Interest** |

*No promotion of or sale of goods, services, or products is permitted during educational sessions*. Any poster session where this occurs will be halted. NCOTA recognizes that a presenter may have a financial interest in products or services discussed during an educational session. Such an interest is not prohibited, but it must be disclosed. Please check the appropriate statement. If a financial interest exists, it must be described below.

|  |  |
| --- | --- |
|  | No speaker has a financial interest in products or services to be discussed in the proposed program. |
|  | The following speakers have a financial interest in products or services to be discussed in the proposed product: |

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| **Agreement** |

* **I/we understand the poster presentation requirements and understand/agree to abide by the policies governing accepted proposals.**
* **I/we understand the requirement that all OT, OTA and student presenters must register for the conference (*speaker rate available*).**
* **In addition to providing the printed poster, presenters will need to provide attendees with a handout or brief synopsis of their poster, at a minimum. This is to provide justification for continuing education credit if a practitioner is audited.**

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| **Primary Presenter Name & “agree” will be considered evidence of agreement to terms:** |  |
| **Date submitted:** |  |