



FLORIDA SOCIETY FOR HISTOTECHNOLOGY

SPEAKER PROPOSAL FORM Application for Contact Hours

The Florida Society for Histotechnology is a non-for-Profit organization whose main purpose is to provide an interchange of ideas pertinent to Histotechnology; to advance professional growth, standards, knowledge and performance in Histotechnology for its members through continuing and formal education programs; and to create mutual understanding and cooperation between FSH and other allied professions.

Presentation Title

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Speakers Information

Speaker 1	Speaker 2
Name:	Name:
Address:	Address:
Work Phone:	Work Phone:
Home Phone:	Home Phone:
Fax:	Fax:
E-mail:	Email:
Certification/Degree:	Certification/Degree:

Presentation Type

<input type="checkbox"/> Seminar:	<input type="checkbox"/> 30 minutes	<input type="checkbox"/> 45 minutes	<input type="checkbox"/> 60 minutes	<input type="checkbox"/> 90 minutes
<input type="checkbox"/> Workshop:	<input type="checkbox"/> Half Day (3 hours)	<input type="checkbox"/> Full Day (6 hours)	Limit: _____	Hands On: <input type="checkbox"/> Yes <input type="checkbox"/> No
Workshop Categories:	<i>Indicate major categories only!</i>			
<input type="checkbox"/> Leadership	<input type="checkbox"/> Immuno/Molecular	<input type="checkbox"/> FL Rules & Regulations or QA/QC		
<input type="checkbox"/> Stain	<input type="checkbox"/> Safety/Ergonomics	<input type="checkbox"/> Medical Errors		
<input type="checkbox"/> Education	<input type="checkbox"/> Specialty/Equipment	<input type="checkbox"/> Techniques		
<input type="checkbox"/> Gross Pathology/Anatomy	<input type="checkbox"/> Supervision/Administration	<input type="checkbox"/> Personal Development		



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Workshop Instruction Level (*Note: A combination of two levels is acceptable!*)

BASIC (for a trained person not currently working in the specialty)

INTERMEDIATE (for a trained person with 2-4 years experience or teaching the specialty)

ADVANCED (for a person with 5+ years of experience or specialty supervisor)

ABSTRACT

Written abstract should include program description and be submitted in publication format. Recommend 150-200 words or 10-15 typed lines. Type abstract below, or include as a separate attachment.

PROGRAM INFORMATION

Contact hours are provided through a contract continued education provider and are given only for the number of hours instruction takes place. This includes time for lecture, wet workshop instruction and practice, case studies, focus group, panel discussion, and a question and answer period. Additional format may be acceptable.

Meeting Room Requirements: Schoolroom Theater Small groups Other _____

AUDIENCE

*Who is the appropriate audience for your program?
(Check all that apply)*

Histotechnologist

Cytotechnologist

Bench Supervisors

Pathologists

Students

Other (please list) _____



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METHODS OF INSTRUCTION <i>(Check all that apply)</i>	
<input type="checkbox"/> Lecture	<input type="checkbox"/> Video
<input type="checkbox"/> Demonstration	<input type="checkbox"/> Kodachromes
<input type="checkbox"/> Role Play	<input type="checkbox"/> Computers
<input type="checkbox"/> Workshop (Hands-On)	<input type="checkbox"/> Other _____

EVALUATION METHOD	
<input type="checkbox"/> Pre-test/Post-test	<input type="checkbox"/> Demonstration
<input type="checkbox"/> Questions & Answers	<input type="checkbox"/> Other _____
<input type="checkbox"/> Case Studies	

HANDOUTS REQUIREMENTS	
<input type="checkbox"/> Yes	<input type="checkbox"/> Duplication Required?
<input type="checkbox"/> No	<input type="checkbox"/> Yes
<input type="checkbox"/> Estimated Number of pages _____	<input type="checkbox"/> No

OBJECTIVES
<p>List two to four educational objectives for your program. <i>Example: At the conclusion of the program, participants will be able to:</i></p> <ul style="list-style-type: none"> ❖ Evaluate the quality of an H&E stain ❖ Recognize the various connective tissue stains by sight ❖ Identify methods of fixation for frozen sections <p>At the conclusion of the program, participants will be able to:</p>
1.
2.
3.
4.

