**2025 VSIAS PRESENTERS’ APPLICATION PROCESS: DEADLINE TO RETURN: January 8, 2025**

Please consider joining us for this the 24th Anniversary of the Virginia Summer Institute for Addiction Studies (VSIAS). VSIAS is the largest education and training conference for addiction professionals in Virginia and one of the premiere addiction training events on the East Coast. Each year, the Summer Institute offers participants an opportunity to interact with a teaching faculty of contemporary experts in the field of addictions**.** Our formats include general sessions, featured forums, and hands-on workshops. The conference also provides access to new ideas in the field and a large variety of networking opportunities.

VSIAS 2025 will be held July 20–23, 2025 at the **Williamsburg Lodge, 310 S. England Street, Williamsburg, Virginia 23185**. This year’s theme is **“Pathways to Progress, Recovery Across the Continuum”.** We will feature 3-hour breakout sessions that focus on the theme to the areas identified below. **VSIAS 2025.***Please check which thematic area or areas your presentation will address:*

***Preference will be given to those presentations which are focused on providing techniques for populations.***

\_\_ 1. Adolescents including  30 minutes of ethics related to this topic

\_\_ 2. Cultural Competency including (e.g. considerations for working with marginalized people) including 30 minutes of ethics related to this topic

\_\_ 3. Basics (Core Competencies) including 30 minutes of ethics related to this topic

\_\_ 4. Skills Training (e.g. Enhancing Skills of Clinicians, harm reduction approaches for individuals or their families) including 30 minutes of ethics related to this topic

\_\_ 5. Recovery Community including 30 minutes of ethics related to this topic

\_\_ 6. Prevention including 30 minutes of ethics related to this topic

\_\_ 7. Healthcare Reform including 30 minutes of ethics related to this topic

\_\_ 8. Clinical Supervision including 30 minutes of ethics related to this topic

\_\_ 9. Technology including 30 minutes of ethics related to this topic

\_\_ 10. Compassion Fatigue including 30 minutes of ethics related to this topic

\_\_ 11. Ethics

\_\_ 12. Yoga including 30 minutes of ethics related to this topic

\_\_ 13. Identifying and Treating Postpartum Depression and SUD including 30 minutes of ethics related to this topic

\_\_ 14. Addiction / Neuroscience and Self-care strategies including 30 minutes of ethics related to this topic

\_\_ 15. Approaches to providing peer recovery supports including 30 minutes of ethics related to this topic

Workshops run 3 hours.

Session: 8:30 AM - 12 noon AM break from 10:00 - 10:30

Session: 1:15 PM - 4:45 PM PM break from 2:30 - 3:00

* Break times may change.

Workshop Level (check one)

\_\_\_ Introductory: Have not had training or practiced in this area

\_\_\_ Intermediate: Have had some training, practicing less than 5 years in this area \_\_\_ Advanced: Certified in the practice, have had advanced training or practicing for 5 or more years in this area

Is this a Keynote/Plenary Session \_\_\_ Is this a Breakout Session \_\_\_ Is this a 1-hour Lunchbox Session \_\_\_

Selection Criteria

Your proposal(s) will be assessed based on its/their relevance to the Summer Institute conference theme, quality, and whether presentation content contributes to credentialing/continuing education requirements for addiction professionals. The selection committee seeks proposals that incorporate evidence-based and/or promising practices as supported by the research literature. Please endeavor to weave the conference theme **"Pathways to Progress, Recovery Across the Continuum”** into your presentation, since the selection committee will give adherence to the theme priority in selection.

Will/Have you presented this topic in the past/future 3 months to any other organization in Virginia?"

\_\_\_\_ YES \_\_\_\_ NO If yes, please assure the subject matter is different and a new title is given to your session.

Workshop Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attachments that should be included in **Word** format. **DO NOT SEND IN PDF FILE. DO NOT HANDWRITE INFORMATION. MUST BE TYPED**:

* Resume or CV **\*3 pages only** Is this included: \_\_\_YES \_\_\_NO
* Brief description of Presentation (100 words maximum) Is this included: \_\_\_YES \_\_\_NO
* Educational Goals and Objectives Is this included: \_\_\_YES \_\_\_NO
* Bio (100 words maximum) Is this included: \_\_\_YES \_\_\_NO

Application Form

Primary Presenter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credentials:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*First and last names (****All communication will be sent to primary presenter to share with co-presenters.****)*

Workshop Name (10 word maximum): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Names, credentials and organizations of co-presenters. (Please include **email addresses**)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have used another presenter's information, have you got permission to use this information and is it documented in your materials and/or handouts? If you answer YES to this question, please list the information that has been used with permission from the original author. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How does this workshop/presentation represent our Summer Institute theme? How does it incorporate evidence-based or promising practices?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your session require seating to be limited to a specific number of participants because of needing space in either the front or back of the room? If so, what is that number \_\_\_\_\_\_\_\_\_\_\_\_\_. Otherwise, rooms will be set to hold as many participants as allowed.

**Financial Information: (Must fill out in its entirety or it will not be accepted)**

Honorarium and travel expenses (**do not include hotel**):

Honorarium (Inclusive travel/meals, materials, printing for handouts) **$\_\_\_\_\_\_\_\_\_\_.**

Will you need hotel accommodations? (**VSIAS will make the hotel reservations\*\*\*see below**)**\_\_\_\_\_ YES \_\_\_\_\_ NO**

**If approved, housing is only provided at our selected hotel during the approved dates.**

**\*\*\*If you fail to cancel your hotel accommodations 72 hours prior to your check-in, you will be charged the hotel rate upon completion of the conference.**

Dates of Hotel Stay: Check-In Date: \_\_\_\_\_\_\_\_\_ Check-Out Date: \_\_\_\_\_\_\_\_\_\_ Approved by VSIAS: \_\_\_\_\_\_\_\_\_\_

Is there a co-presenter who needs hotel reservations? (**VSIAS will make the hotel reservations**) **\_\_\_\_\_ YES \_\_\_\_\_ NO**

Dates of Hotel Stay: Check-In Date: \_\_\_\_\_\_\_\_\_ Check-Out Date: \_\_\_\_\_\_\_\_\_\_ Approved by VSIAS: \_\_\_\_\_\_\_\_\_\_

**Items for Sale:**

Items for sale may not be displayed in the room where the presentation is done. If you have authored a publication, you are welcome to apply to sell your book. See **VIRGINIA SUMMER INSTITUTE FOR ADDICTION STUDIES SPEAKER AGREEMENT**, **Attachment 2: Book Sellers Policies**

**Electronic Support:**

**ALL PRESENTERS MUST BRING THEIR OWN LAPTOP**. VSIAS does not provide laptops or art supplies, and presenters are responsible for any special materials, including hardcopy handouts**. If you would prefer to have participants bring a hardcopy of your handouts, please send them by June 1, 2025** to be posted to the VSIAS website. No VCR’s or TV’s are available; your visual information must be on a flash drive.

CHECK ONE: \_\_\_ Keynote Session \_\_\_Lunchbox Session \_\_\_ Breakout Session

Please check what you will require for your session.

\_\_\_ LCD Projector & Screen \_\_\_ Table for Materials \_\_\_ Newsprint & Markers

\_\_\_ Wireless Microphone(s)\* \_\_\_ Tech Support \_\_\_ Do you need sound for your laptop? If yes, what type of computer do you have? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand that VSIAS does not allow recording of any presentations, at any time. \_\_\_ Initials

I understand that VSIAS recommends that any internet files be downloaded onto the speaker’s laptop for use rather than use of a direct internet connection during the presentation as connectivity may be inconsistent. \_\_\_ Initials

\*Wireless microphone(s) will only be provided if the room is large

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Marketing:**

Marketing is prohibited during the presentations.

I have read and will abide by this: \_\_\_\_\_\_\_\_\_\_\_\_initials

**Laptop:**

VSIAS does not provide laptops, so you will need to bring your laptop for your presentation with your information pre-loaded to your computer. VSIAS will provide an HDMI or VGA cable to connect to the projector if needed, due to the wide range of available computers. You will be responsible for any special adapters (Apple to HDMI/VGA) needed to output from your laptop to the cable. VSIAS does not provide remotes capable of advancing power point slide shows.

We need to know the following:

1- Type of computer to projector connection**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*Note, Williamsburg Lodge does have wireless internet available during the conference but it is suggested that you download any YouTube videos or audio segments due to band width restrictions and available download speed.**

**Meeting Room Setup/Configurations: Please mark first and second choice. Note: set-up depends on space availability. Keynotes may require venue staff to suggest set-up according to number of participants in these sessions.**

\_\_\_ **Theater style** seating will be provided unless classroom or schoolroom seating is essential for the training experience. Please indicate if this is essential.

**\_\_\_ Schoolroom or Classroom:** The most desirable setup for medium to large-size sessions. This configuration requires a relatively large room. Tables provide attendees with space for spreading out materials and taking notes.

\_\_\_ **Space in addition to seating:** If you will need extra space for activities.

Mark where the space is to be cleared. We will do our best to accommodate your request:

\_\_\_ front of room \_\_\_ back of room

Narrative Description

In a separate WORD document, not pdf, please provide a narrative description of your presentation. This narrative is another key to the selection process. (You may also include PowerPoint slides.) Be sure to describe all important aspects of your presentation to include:

Presentation content and format overview (in WORD format, not pdf)

Goals and objectives of the presentation (in WORD format, not pdf)

**"Pathways to Progress, Recovery Across the Continuum"** thematic each area addressed in the presentation. (If multiple areas are addressed, please note them in **WORD** format):

1. Adolescents 7. Prevention

2. Cultural Competency 8. Healthcare Reform

3. Basics (Core Competencies including Ethics) 9. Clinical Supervision

4. Skills Training (i.e. Enhancing Skills of Clinicians) 10. Technology

5. Recovery Community 11. Compassion Fatigue

6. Yoga 12. Ethics

Brief bio for purposes of introduction (in WORD format, not pdf)

Curriculum vita or resume, 3 pages only (in WORD format, not pdf)

E-Mail Submissions **deadline extended to**: January 8, 2025(\*\*MUST BE IN WORD FORMAT, NO PDF except your resume/vitae)

Cathy Reiner [info@vsias.org](mailto:info@vsias.org) **Please make sure all information is enclosed or we will not be able to accept your request until completed. Thank you.**