**2024 Life with Brain Injury Annual Conference**

**Request for Proposals**

Brain Injury Association of South Carolina (BIASC) and South Carolina Brain Injury Leadership Council (SCBILC) will host the annual statewide conference*, Life with Brain Injury Conference,* on Friday, July 26, 2024, Columbia, South Carolina at Cooperative Conference Center. The conference is open to professionals, individuals with brain injury, family members, caregivers, and other interested persons. We invite you to share your expertise in the field of brain injury services by submitting a proposal to be a session presenter at our conference.

BIASC is a nonprofit organization that was developed by persons with brain injury, their families and concerned professionals to provide information and support to those who have experienced a brain injury. BIASC is a chartered affiliate of the Brain Injury Association of America. Our mission is to create a better future through brain injury prevention, research, education and advocacy. For more information, please visit [www.biaofsc.com](http://www.biaofsc.com), email [director@biaofsc.com](mailto:coordinator@biaofsc.com), or call 1-803-731-9823 or 1-877-TBI-FACT.

SCBILC is the state’s advisory body on brain injury as mandated under the federal Traumatic Brain Injury (TBI) Act of 1996. It serves as an active forum for addressing systems issues, service gaps, funding constraints and public awareness related to brain injury. The mission of SCBILC is to provide leadership and empowerment to persons with brain injury by promoting a range of accessible services that are responsive to their needs.

The 2024 Life with Brain Injury conference will provide a forum for the exchange of information on programs, resources, and best practices in brain injury rehabilitation and services. The conference presentation topics need to address all types of brain injuries. Proposals must be applicable to a broad audience, and not specific to South Carolina residents; however, presentations on programs offered in South Carolina that others may be interested in duplicating are welcome. In addition to presentations, there will be exhibitors and sponsors to provide information about their brain injury services and resources at the conference.

Individuals interested in presenting at this conference should submit proposals by **Monday, January 8, 2024.** The total presentation time is one hour and includes the time for Q & A’s.

The attached form should be submitted to Rose Burgess, Conference Coordinator, burgessenterprises@windstream.net. Early proposals will receive priority scheduling for the Friday, July 26, 2024 event. The conference planning committee will review each proposal. Final decisions will be made by the committee. You will be notified regarding the status of your proposal.

Thank you for your interest in presenting at the Life with Brain Injury Conference!

Sincerely,

SC Brain Injury Leadership Council Workforce Development Committee

Page 1 of 2

**2024 Life with Brain Injury Conference Proposal**

Please note: Unless your proposal is to address Brain Injury 101 (introduction to brain injury), please assume participants have knowledge of brain injury and omit basic brain injury information in your proposal/presentation. Please use additional space in completing the form below as needed.

1. Presenter contact information: (If co-presenting, each presenter needs to complete this form.)

Name and credentials\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Credentials are used in the brochure/program for the purpose of continuing education offered.

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number(s) (best way to contact you, especially for emergency on conference day)

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Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Title of presentation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Overview of presentation (not to exceed 50 words) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Presentation objectives \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Intended audience (clinicians, case managers, social workers, brain injury survivors,

caregivers) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Preferred scheduling time (Friday AM or Friday PM) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Speaker(s) biographical information (4-5 Sentences) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. If co-presenting, please indicate with whom and their contact information. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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9. Historically, presenters have donated their time presenting at the conference. If your requirements are different, please explain here. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Page 2 of 2