

Call for Papers Application
TMC –Teaching and Mentoring Communities
Early Care and Education: The Zero to Five Challenge
South Padre Island Convention Center
October 29-31, 2009
South Padre Island, Texas
<http://tmccentral.org/early-care-conference.html>

TMC is issuing this Call for Papers in an effort to solicit presentations for its conference entitled Early Care and Education: The Zero to five Challenge. This form must be used for all Call for Papers applications. Call for Papers must be received no later than August 31, 2009. Please ensure that you include all your contact information including e-mail address and the phone number.

Name of Lead Presenter: Mr. Ms. Dr. Rev. _____
 Name of Co-presenter(s): _____
 Title: _____
 Mailing Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone # _____ Fax# _____ Email: _____

Title of Presentation: _____

Please include a Brief Overview/Description of the Session. Please include as attachment (50 words or less).

Presentation length: 1.5 hours **Are you willing to present twice?** Yes No
Can you present in Spanish?

Continuing Education Units (CEU)
Do you want your presentation to be awarded CEU credit? Yes No
If Yes, please complete and submit the application "Section C" enclosed.

The program tracks listed below represent the areas expected to address the latest research, inovative techniques, methodologies in early care and education

Program Tracks (Check all that apply)

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Early Education | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Health | <input type="checkbox"/> Partnerships |
| <input type="checkbox"/> Head Start | <input type="checkbox"/> Family Services | <input type="checkbox"/> Management/Admin | <input type="checkbox"/> Advocacy/Legislation |
| <input type="checkbox"/> Disabilities | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Healthy Relationships | <input type="checkbox"/> Research |
| <input type="checkbox"/> Child Care Service | <input type="checkbox"/> Pre K | <input type="checkbox"/> E-Rate | <input type="checkbox"/> Other |

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Target Audience (Check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Teachers/Asst. Teachers | <input type="checkbox"/> Principals | <input type="checkbox"/> Curriculum & Instructional Staff |
| <input type="checkbox"/> Head Start Directors | <input type="checkbox"/> Child Care Providers | <input type="checkbox"/> Mentors, Trainers and Advisors |
| <input type="checkbox"/> Program Directors & Adm. | <input type="checkbox"/> Policy Makers | <input type="checkbox"/> Early Childhood Specialist in Education |
| <input type="checkbox"/> Superintendents | <input type="checkbox"/> Advocates for Young Children & Families | <input type="checkbox"/> Other |

Session Time Preference:

- | | | |
|--|--|--|
| <input type="checkbox"/> Thursday, October 29, 2009
3:00-4:30 PM | <input type="checkbox"/> Friday, October 30, 2009
8:30 -10:00 AM
10:30 -12 Noon
2:00-3:30 PM
4:00-5:30 PM | <input type="checkbox"/> Saturday, October 31, 2009
8:30 -10:00 AM |
|--|--|--|

Please Remember to Attach the Following:

- An outlines description of your session (200 words maximum) including learning objectives and tentative agenda.
- A fifty word biographical sketch

Audio Visual Request:		
<input type="checkbox"/> LCD Projector** (PowerPoint)	<input type="checkbox"/> Laptop Computer ** (PowerPoint)	<input type="checkbox"/>
<input type="checkbox"/> Microphone	<input type="checkbox"/> Overhead Projector	<input type="checkbox"/>
<input type="checkbox"/> Overhead Screen	<input type="checkbox"/> Flip Chart	<input type="checkbox"/>
<input type="checkbox"/> Easel	<input type="checkbox"/> Markers	<input type="checkbox"/>
<input type="checkbox"/> TV/VCR/DVD	<input type="checkbox"/> Other	<input type="checkbox"/>

If you would like to present on more than one topic, please attach information for your second topic.

Please Submit Call for Papers information to:

Lydia Garza, Secretary
110 S. Daniel Salinas Blvd.
P.O. Box 536
Donna, Texas 78537
Lydia.garza@mail.tmccentral.org (956) 464-5000 Fax: (956) 464-2100

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SECTION C

General Instructions: Please provide clear responses to the following items. (Note: You may be asked to submit additional information upon request.)

1. Provide a current description of your organization's qualifications and experience to provide professional development activities to educators. This should include your background and experience in giving workshops and/or staff development training. In addition, attach a list of your program design team members, lecturers, or presenters **and** their credentials/vitas. If known, include any names and vitas of whom you may contract with to provide this service.

2. Method of delivery (check all that apply). Explain how each audience and grade level selected in Part 2 will be served by your professional development activities.

Face-to-face	<input type="checkbox"/>	Audio conference	<input type="checkbox"/>
Conference/seminar	<input type="checkbox"/>	Interactive CD-Rom	<input type="checkbox"/>
Web-Based	<input type="checkbox"/>	Audio/Video CD or tape	<input type="checkbox"/>
Video conference	<input type="checkbox"/>	Other (specify) _____	<input type="checkbox"/>

3. Describe in detail the types of continuing professional development experiences you or your organization provide educators. Summarize the methods, procedures, materials and techniques that are used in the professional development provided.

4. Discuss in detail how your proposed CPE activities meet the Texas criteria for quality professional development. This information may be found at: <http://www.sbec.state.tx.us/SBECOnline/certinfo/certren.asp> and click on "Professional Development Imperative."

5. Describe in detail how your professional development experiences reflect proficiencies for Texas educators in learner-centered schools. This information is the foundation for the Professional Development & Appraisal System (PDAS) found in [19 TAC §150.1002](#).

6. Describe in detail how each professional development activity, identified in Part 3, directly correlates to the Texas Essential Knowledge and Skills (TEKS). These may be found on the Texas Education Agency website at <http://www.tea.state.tx.us/teks/index.html>.

7. What is the evidence of the impact of your program offerings on teaching/administrative practices and/or student learning?

8. Provide the titles of three relevant professional development experiences, such as workshops, training events or conferences that were created and presented by your organization. In addition, please include the contact person, phone number, fax number, and e-mail address for which the professional development activity was presented. **Note:** It is your responsibility to secure permission to list names and contact information for references.