

# TAAE 2025 - CALL FOR PAPERS!

## SUBMISSION DEADLINE - **October 11, 2024**

### 2025 TAAE PRESENTER CONTRACT

On behalf of myself and my co-presenters, should this abstract be selected. I/we agree that:

1. **Presenters at the TAAE In Person Conference are not exempt from paying full registration fees.**
2. **Presentations requiring laptops and laptop projectors must be supplied by presenter(s). Note: Laptops/PCs Not Provided.**
3. Individuals submitting this proposal and signing this form agrees to receive all conference correspondence and accept responsibility for conveying conference-related information to co-presenters.
4. Appropriate "Releases of Confidential Information" have been obtained for all presenter materials that will be used as a part of this presentation. The responsibility for protecting client confidentiality rests with the presenter(s).
5. Individuals submitting or included within this proposal have agreed to be present in Houston, Texas or Virtual during the hour and date assigned to this presentation at the 2025 TAAE Conference, and conduct this proposed presentation according to the conditions listed above.

Date Submitted: \_\_\_\_\_

Presenter Signature: \_\_\_\_\_

Principal Signature/Approval: \_\_\_\_\_

This form may be filled out on line or downloaded at <https://www.taae.org/call-for-papers/>

#### A. Can you do your presentation Virtual?

- Yes, I can do my presentation Virtually.

#### B. PRESENTER(S) BIO INFORMATION

- 1.) \_\_\_\_\_  
\_\_\_\_\_
- 2.) \_\_\_\_\_  
\_\_\_\_\_
- 3.) \_\_\_\_\_  
\_\_\_\_\_
- 4.) \_\_\_\_\_  
\_\_\_\_\_

**PLEASE MAIL TO:**  
TAAE 2023 Conference  
2202 S. 51st Street  
Temple, TX 76504  
Phone: 512-850-0365  
Fax: 254-613-9099  
E-mail: [sawmhq@gmail.com](mailto:sawmhq@gmail.com)



### AUSTIN, TEXAS or VIRTUAL CONFERENCE

## TAAE 2025

### 35th ANNUAL CONFERENCE

July 7 - 9, 2025 ♦ Houston, TEXAS

**PLEASE TAKE THE TIME TO SUBMIT YOUR FORM SO THAT WE CAN PLAN OUR CONFERENCE.**  
EACH SESSION IS 50 MINUTES —Please print neatly or type.

Submitter/Presenter Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Wk): \_\_\_\_\_ Phone (Hm): \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address (Main Contact): \_\_\_\_\_

E-mail Addresses of all other Presenters:

E-mail(1): \_\_\_\_\_

E-mail(2): \_\_\_\_\_

E-mail(3): \_\_\_\_\_

E-mail(4): \_\_\_\_\_

#### C. CONFERENCE PRESENTATION/SUITABILITY

*This presentation is most suitable for (check all that apply)*

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Math               | <input type="checkbox"/> Science                          | <input type="checkbox"/> SOL              | <input type="checkbox"/> English                  |
| <input type="checkbox"/> Elementary         | <input type="checkbox"/> Middle School                    | <input type="checkbox"/> High School      | <input type="checkbox"/> Chapter 37               |
| <input type="checkbox"/> School of Choice   | <input type="checkbox"/> Technical                        | <input type="checkbox"/> Administrative   | <input type="checkbox"/> Curriculum & Instruction |
| <input type="checkbox"/> Discipline Centers | <input type="checkbox"/> Licensed Professional Counselors | <input type="checkbox"/> Service Learning |   |
| <i>Type of Program:</i>                     |   |   |   |
|   | <input type="checkbox"/> Information                      | <input type="checkbox"/> Application      | <input type="checkbox"/> Instruction              |

#### D. PRESENTATION INFORMATION *\*Use additional form if more than one topic*

1. **Title of presentation:** \_\_\_\_\_  
\_\_\_\_\_
2. **A brief description or summary of session:** (Note: All or part of this description will be used in the conference programs; use attachments if necessary.) TAAE reserves the right to select those presentations that are Curriculum/TAKS based and Provide teachers with skills and information that can be immediately transferred to the classroom.  
**Session Description:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  

*(Please use an additional sheet if needed)*
3. **What skills, information or Make & Take items will come with this presentation?**  
\_\_\_\_\_  
\_\_\_\_\_

#### E. AUDIO/VISUAL - GUIDELINES & INFORMATION

4. **Audio/Visuals: (Limit one please.)** **Note: Laptops not provided**  
**You will need to bring the proper adapter for VGA or HDMI connections**  
**Note: All rooms will be equipped with a projector, screen and power carts for presentations.**  
**Note: PowerPoint presentations/computers must be supplied by schools or presenters.**  
I Need/Require:  Audio