CALL FOR POSTERS

Please submit
(A) Cover Letter/description
(B) Full CV

PLEASE NOTE: PAPERS WILL NOT BE REVIEWED UNLESS ALL THE INFORMATION LISTED BELOW IS INCLUDED.

A. **Cover Letter**: Attach a cover letter that includes the following;
   1. Exact Title of proposed poster presentation.
   2. Presenter(s)
      i. Lead Presenter’s name, degree, and email address
      ii. Additional presenter: same as lead presenter
   3. Requirement for electricity
   4. A brief description of the research poster

B. **Full CV**
   For lead presenter only

**PRESENTATION GUIDELINES**
Please keep the following in mind as you prepare for the conference:

1. You will have place to display your poster on an easel/white board
2. If your require special tape or other materials please bring that along, pushpins will be available
3. We request that you have your poster ready to display no later than Thursday morning of the conference at 9am and plan to leave it displayed throughout the conference. NEFESH cannot be responsible for posters left after the conference.
4. Prepare a single-page handout with the poster title, author(s), affiliation, abstract and contact information such as an email address

**Deadline: November 11, 2019**

Please Note: No Proposal will be accepted unless all materials are submitted!
Poster presenters are not exempt from registering for the conference

E-mail or fax each proposal to:

*Email To: [secretary@nefesh.org](mailto:secretary@nefesh.org)*

*Phone: 201-384-0084 Fax: 347-342—3046*

*All presenters will be required to register for the Conference*
CONFIDENTIALITY AGREEMENT

Owing to the sensitive nature of cases relevant to your work with patients and clients within your community, it is essential from the standpoints of Halacha and confidentiality that all presenters will conceal any and all identifying information in discussing persons and situations.

I hereby attest that I will adhere to the strictest application of confidentiality guidelines as prescribed by halacha and my professional body.

Speaker’s Signature: 

Date: ________________________________

Please fax or E-mail
Alicetusk@nefesh.org
Fax 347-342-3046