

The Ohio State University College of Social Work Continuing Education Program works closely with community professionals to provide quality continuing education programing. If you would like to present with our program, please provide us with the following information. Thank you for your interest! We look forward to working with you.

Presenter Check List

* Presenter Application
* Timed Agenda for the presentation
* Enclose Vita/Resume of each person presenting
* Vendor Setup form

If you are currently employed by OSU, you do not need to complete this form.

* Handouts and materials

Please submit materials with the application or at least 1 month prior to the scheduled presentation date. If we do not receive the materials in the required timeframe, it will be the presenter’s responsibility to prepare the materials and copy them at their own cost.

Please return this packet by email to cswce@osu.edu

If you would prefer to mail your information, please submit it to:

OSU College of Social Work

Attn: Continuing Education

400 Stillman Hall

1947 College Road

Columbus, Ohio 43210

Presenter Application

Presenter Information

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| --- |
| Presenter Name & Credentials: |
| License #: |
| Email Address: |
| Primary Phone #: |
| Additional Phone #: |
| Home Address: |

Brief Presenter Bio:

\*If we have a current bio on file, please skip this section.

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Program Information

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| Program Title: |
| Training Length (2, 3 or 6 hours):  |

Brief Program Description:

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Program Objectives: (By the end of this training, participants will be able to…)

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| 1. |
| 2. |
| 3. |

Please check all applicable topics that pertain to your program. Topics are subject to final review by our program.

🗖 Administration and Management 🗖 Aging 🗖 Alcohol, Tobacco & Other Drugs 🗖 Case Management 🗖 Children, Youth & Families 🗖 Clinical 🗖 Community Organization & Social Policy 🗖 Ethics 🗖 Health 🗖 Mental Health 🗖 Mind & Body/Wellness 🗖 Private Practice 🗖 School Social Work 🗖 Social and Economic Justice & Peace

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| Other: |

The OSU, College of Social Work is an approved provider for the State of Ohio Counselor, Social Worker and Marriage & Family Therapist Board.SW/MFT Provider number: RST111002

Counselor Provider number: RCX011401

Vendor Set Up Form

Here is a link to the form, copy and paste it into your web browser: http://go.osu.edu/formw9

If you would like OSU to pay your business, please complete pages 1 and 2. If you would like OSU to pay you as an individual, please complete page 1 only.

At this time, we are unable to accept digital signatures. Please complete the form and mail it to the address on page 1 of this application or fax it to 614-292-1409, Attention: Continuing Education.