**WLA 2017 Programs: Proposal Form**

Thank you for your interest in presenting a program at one of the 2017 Washington Library Association Conferences.

-- WLA LEARN LOCAL! One Day Conferences --  
April 7 in Seattle (Thanks to The Seattle Public Library for being our site sponsor!)  
April 28 in Yakima (Thanks to Yakima Valley College for being our site sponsor!)  
April 29 in Spokane (Thanks to Spokane Public Library for being our site sponsor!)

-- WLA ANNUAL Conference --  
November 1-4, Tacoma's Hotel Murano

Programs on all topics of relevance to libraries of any kind are sought, from 75 minute sessions to 3-4 hour workshops. Presenters are encouraged to request permission from their employers to attend the conference(s) before submitting proposals.

Proposals are due no later than Tuesday, January 31.   
The program selection committee will notify applicants of their proposal status by February 10.

Please direct questions to the WLA office at [info@wla.org](mailto:info@wla.org) or (206) 823-1138.

\* Required

Primary Contact

Please specify one Primary Contact for this proposal.

If proposal is accepted, this person will act as the liaison for ALL planning and communications up until the event, and agrees to share all communications with any co-presenters or sponsors of your program.

Name\*

*Mindy McCormick Coslor, Ph.D., M.Libr.*

Organization or Employer\*

*Skagit Valley College*

Mailing Address\*

*2405 E College Way*

*Mount Vernon, WA 98273*

Email\*

[*Mindy.Coslor@skagit.edu*](mailto:Mindy.Coslor@skagit.edu)

Phone\*

*360-416-7761*

Conference Program Information

This information will be used to evaluate your proposal, and if accepted, will be used to promote your program.

Title\*

*The Challenge of Literacy in Our Communities and Practical Ways Libraries Can Make a Difference*

Description\*

This information will be used in the printed program, website, and other promotional materials. Please focus on the most interesting and appealing aspects of the program, and be sure to include what participants will gain as a result of attending. Description should be about 100 words and may be edited for fit and clarity.

*Presenters will describe the impact of under-education among adults, the literacy needs of immigrants in our communities, programs offered to assist these populations, and ways that libraries can partner and contribute to solving this challenge in order to increase economic self-sufficiency in our communities. Presenters will describe programs offered through the community and technical colleges and community-based organizations. Participants will discover new ways to connect with adults who may not frequent libraries, but are working to learn English and improve their literacy. This program will describe practical strategies that libraries can employ to attract adult literacy and English language learners. Participants will leave with plans for next steps toward implementing promising strategies for their communities.*

Target Audience and Outcomes \*

Briefly describe who would most benefit from attending this program? What will participants be able to do as a result of attending this program? This information is used to help better understand your proposal.

*As a result of attending this program, public and academic librarians will have a greater understanding of the challenges faced by adults with low-literacy and/or non-English language speakers. Attendees will know what resources exist to help these populations and ways librarians can support literacy and English language acquisition. In addition, participants will be exposed to possible collaborations across agencies to meet the literacy needs in our local communities.*

Audience Engagement \*

What components are included to engage and involve the participants? This information is used to help better understand your proposal.

*In addition to PowerPoint, the presenters will show short video clips, provide handouts, and give examples of strategies that can be employed at their libraries. Participants will brainstorm and share next steps in increasing support to low-literacy populations in collaboration with partnering agencies.*

Format and Location

Sessions are 75 minutes in length. Unless otherwise requested, room set-up is theater style with an LCD projector, screen, and wifi access.

Workshops are 3 or 4 hours in length. Unless otherwise requested, room set-up is classroom style with an LCD projector, screen, and wifi access.

LAPTOPS ARE NOT PROVIDED.

Length of Program \*

Please indicate the possible length of your program. You may select more than one option.

75 minute session *X*

3 hour workshop

4 hour workshop

Other:

Location of Program \*

Please indicate all 2017 WLA Conferences where you are willing and able to present your program. You may select more than one option. Greater flexibility may increase the chances of acceptance.

Friday, April 7, Learn Local! Seattle

Friday, April 28, Learn Local! Yakima

Saturday, April 29, Learn Local! Spokane

Wed-Sat, November 1-4, Tacoma *X*

Additional Information

Please list any additional room set-up or A/V requirements, special requirements regarding program timing, or other requests. Additional equipment costs may be charged to the Sponsor of this program.

Sponsors and Financial Support

PLEASE READ BEFORE COMPLETING THIS SECTION. Presenters are encouraged to seek support from their employers to cover the costs of conference participation, or request sponsorship from a WLA Division, Section, or other library advocate or support group. The conference budgets are extremely limited. However, if additional WLA funding is required as part of this proposal, please include details below.

Program Sponsor(s), if you have one

The Sponsor(s) named below have agreed to provide financial or logistical support for this program.

Presenter Honorarium

*Not necessary*

Presenter Travel or Lodging

Estimate travel costs and/or number of nights lodging required. Lodging arrangements are the responsibility of each Presenter.

*Mindy Coslor: Lodging for 3 nights ($xxx), mileage (96.8 miles)*

*Jon Kerr: mileage (30 miles)*

*Troy Gorache: mileage (30 miles)*

Other Expenses

*Mindy Coslor: Meals ($xxx) Registration ($xxx)*

*Jon Kerr: Meals ($xxx); Registration (waived)*

*Troy Gorache: Meals ($xxx); Registration (waived)*

Total Expenses

*Mindy Coslor: $xxx*

*Jon Kerr: $xxx*

*Troy Gorache: $xxx*

Provide any clarification of anticipated expenses

For example, if the anticipated expenses are divided between more than one presenter, let us know how that breaks down.

Program Presenter(s)

The Primary Contact named above is responsible for being the liaison between program Presenter(s) and Conference Planners. If this proposal is accepted, the Conference Planners will assist the Primary Contact with program coordination prior to and during the event.

Please note that regarding conference attendance, registration fees are typically waived only for Presenters who will be attending solely to present their own program and will NOT be attending any other portion of the conference.

Please provide COMPLETE contact information for each Presenter. In most cases, we recommend having no more than four Presenters. If you need to enter more Presenters, please use the last Notes/Comments field.

Presenter #1

Name \*

*Jon Kerr*

Title \*

*Director, Basic Education for Adults*

Organization/Employer \*

*Washington State Board for Community and Technical Colleges*

Address \*

*1300 Quince St SE, 4th floor*

City\*

*Olympia, WA 98504-2495*

Phone\*

[*360-704-4326*](tel:360-704-4326)

Email\*

[*jkerr@sbctc.edu*](mailto:jkerr@sbctc.edu)

Notes/Comments:

Presenter #2

Name \*

*Troy Goracke*

Title \*

*Program Administrator, Basic Education for Adults*

Organization/Employer \*

*Washington State Board for Community and Technical Colleges*

Address \*

*1300 Quince St SE, 4th floor*

City\*

*Olympia, WA 98504-2495*

Phone\*

[360-704-4362](tel:360-704-4362)

Email\*

[*tgoracke@sbctc.edu*](mailto:tgoracke@sbctc.edu)

Notes/Comments:

Presenter #3

Name \*

*Mindy McCormick Coslor, Ph.D., M.Libr.*

Title \*

*Director of Library Services*

Organization/Employer \*

*Skagit Valley College*

Address \*

*2405 E College Way*

City\*

*Mount Vernon, WA 98273*

Phone\*

*360-416-7761*

Email\*

[*mcoslor@skagit.edu*](mailto:mindy.coslor@skagit.edu)

Notes/Comments:

Presenter #4

Name \*

Title \*

Organization/Employer \*

Address \*

City\*

Phone\*

Email\*

Notes/Comments:

>>> PRINT A COPY OF THIS PROPOSAL <<<

Before clicking submit, we recommend you print a copy of this proposal for your own records.