

## 53<sup>rd</sup> Annual Symposium on Recent Research

April 27-28, 2018 Hollywood Beach, FL

### **Call for Papers**

#### Recent Research with the MMPI-2-RF, MMPI-2, MMPI-A-RF & MMPI-A

The 53<sup>rd</sup> Annual MMPI Symposium will be held on April 27-28, 2018 at the <u>Hollywood Beach Marriott</u> in Hollywood Beach, FL. We encourage authors to consider submitting one (or more) of the following:

- 1. **Integrated Symposium**: Consisting of 3-4 papers with an identified chair and discussant (90 minutes).
- 2. **Comprehensive Paper Presentation**: Comprehensive report and/or integration of research findings from multiple studies (30 minutes).
- 3. **Brief Report**: Concise report of a single study (15 minutes).
- 4. **Poster**: Poster-board based research report.

Owing to time constraints, it may not be possible to accommodate presenters' preferred format. On the Proposal Submission Form, you will be asked whether you would be willing to present in an alternative format

**PROPOSAL SUBMISSION PROCESS:** Please email to Katie Nickerson at <u>nickerso@umn.edu</u> by **January 31, 2018.** 

- 1. A completed **Proposal Submission Form**
- 2. **Abstract** (For a symposium a 150-word general abstract plus a 150-200-word abstract for each paper; a 200-400-word abstract for comprehensive presentations); **and** a 200-300-word abstract for posters and brief reports.

By submitting the form and abstract you are committing to attend the meeting and present your paper or poster if your submission is accepted.

Authors will be notified of the status of their submission in mid-February. A schedule of presentations and information about the meeting will be sent at a later date. Presenters receive a reduced registration fee (\$125) that will cover attendance at all symposium sessions. Travel, housing, and other expenses are the responsibility of the presenter.

**QUESTIONS:** Please direct questions regarding submissions to one of the program co-chairs, Martin Sellbom (msellbom@psy.otago.ac.nz) or Dustin Wygant (dustin.wygant@eku.edu). Please contact Katie Nickerson for general inquiries regarding the MMPI Workshops/Symposium (nickerso@umn.edu /612-301-4821).



The MMPI Workshops and Symposium program, sponsored by the Department of Psychology, Kent State University, coordinated by the University of Minnesota Press, is approved by the American Psychological Association to offer continuing education credits. The MMPI Workshops and Symposium maintains responsibility for the program and content.



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#### PROPOSAL SUBMISSION FORM

- 1) **COMPLETE** the submission form.
- 2) COMPOSE your abstract:
  - Center the title at the top of the page in 14-point font
  - Center author(s) & affiliation(s) below title in 14-point font
  - Single-space the paragraphs, 12-point font
  - Align left with no indents

3) EMAIL by January 31, BOTH the Form & Abstract to Katie Nickerson, Marketing & Training
Manager, at: nickerso@umn.edu (PH: 612-301-4821)
For general questions, contact Katie (see above).
For questions about submission content, contact either:

- Dr. Martin Sellbom (msellbom@psy.otago.ac.nz) - Dr. Dustin Wygant (dustin.wygant@eku.edu).

Submission Title:
Type of submission:
☐ Integrated Symposium ☐ Brief Report ☐ Comprehensive Presentation
☐ Poster Owing to time constraints, it may not be possible to accommodate your preferred format. Are you willing to present in an alternative format? ☐ Yes ☐ No
Contact Information (Primary Presenter)
Full Name:
E-mail:
Telephone:
Affiliation:
Mailing Address:
City:
State/Province:
Zip/Postal Code:
Country:
Are you currently a graduate student?  Yes No



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Please fill out the following for each additional presenter or author:

Contact Information (2 <sup>nd</sup> Presenter or Author)
Full Name:
Affiliation:
Phone:
E-mail:
Contact Information (3 <sup>rd</sup> Presenter or Author)
Full Name:
Affiliation:
Phone:
E-mail:
Contact Information (4 <sup>th</sup> Presenter or Author)
Full Name:
Affiliation:
Phone:
E-mail:
Contact Information (5 <sup>th</sup> Presenter or Author)
Full Name:
Affiliation:
Phone:
E-mail:
Contact Information (6 <sup>th</sup> Presenter or Author)
Full Name:
Affiliation:
Phone:
E-mail: