

CALL FOR PRESENTATIONS!



Annual Michigan Peer Conference

April 28th & 29th

Suburban showplace collection

46100 Grand River Ave. Novi, MI 48374

SUBMISSION DEADLINE: Friday, January 5th, 2026

Conference Goals:

- Promote and advance statewide collaboration, partnerships, and connections in peer services.
- Expand creative and effective peer led wellness tools.
- Broaden awareness, access, and information that supports self-advocacy and social justice.
- Highlight best, promising and evidence-based practices for working with diverse populations.
- Increase awareness, knowledge, and skills in multiple pathways to recovery.

Successful proposals will include clear learning objectives, address conference goals, and include person(s) with lived experience leading and/or co-leading the presentation.

Due to limited number of spaces available, only one workshop per individual may be considered. Presenters will receive a complimentary conference registration for the day of their presentation.

Instructions

Complete the form below and submit to the MiPeers website at <https://mipeers.org/presenter-application/>. The main presenter submitting the proposal will be notified by email of acceptance or denial.

Presentations must meet the following length requirements depending on the day of the presentation selected.

- **Tuesday, April 28:** Workshop Sessions – Multiple Times Available
 - 1.5 hours of instruction, no session breaks
- **Wednesday, April 29:** Workshop Sessions – Multiple Times Available
 - 1.5 hours of instruction, no session breaks

CONTINUING EDUCATION:

The annual peer conference aims to provide the peer workforce with opportunities to receive continuing education credits. In crafting seminars and workshops, please follow the MDHHS CE eligibility criteria outlined below.

- Integrated health and wellness skills
- Ethics
- Evidence-based practices for CPSS/CPRC roles and responsibilities
- Multiple pathways to and of recovery
- Other; (must demonstrate alignment with recovery values and peer roles)

WORKSHOP SUBMISSION FORM

SUBMISSION DEADLINE: January 5, 2026

Please type your responses. Handwritten applications will not be reviewed.

The description you provide below will be included in the brochure. Please ensure that it describes the training in a way for participants to understand.

Title:

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DATE:

Check the box below for your preferred date.

☐

April 28

☐

April 29

Learning Objectives:

(MUST Include 3)

1.

2.

3.

DESCRIPTION:

(Limit of 150 Words)

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Main PRESENTER/CONTACT:

Name:

Certification: ☐ CPRC ☐ CPSS ☐ Peer Mentor

Title:

Organization:

Address:

Phone:

Email:

CO-PRESENTER:

Name:

Certification: ☐ CPRC ☐ CPSS ☐ Peer Mentor

Title:

Organization:

Address:

Phone:

Email:

CO-PRESENTER:

Name:

Certification: ☐ CPRC ☐ CPSS ☐ Peer Mentor

Title:

Organization:

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CO-PRESENTER:
Name:
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Title:
Organization:
Address:
Phone:
Email:

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