**2023 Bluegrass SHRM**

**Speaker Request Form**

*Please review your submission for completeness and accuracy. Proposals with missing information cannot be evaluated. Submit all required items to* **Beverly Clemons,** *Programs Director, at* [*beverly@cmiconsulting.com*](mailto:prodevelop@bgshrm.org)- *for consideration.*

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| **Name** | Click or tap here to enter text. |
| **Job Title** | Click or tap here to enter text. |
| **Company/Organization** | Click or tap here to enter text. |
| **Address** | Click or tap here to enter text. |
| **City, State, ZIP** | Click or tap here to enter text. |
| **Office Phone** | Click or tap here to enter text. |
| **Mobile Phone** | Click or tap here to enter text. |
| **FAX Number** | Click or tap here to enter text. |
| **Email Address** | Click or tap here to enter text. |
| **Website** |  |

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|  | | **Requested Amount** | **Approved Amount** |
| **Travel Required** | **YES  NO** |  |  |
| **Speaker Fee Required**  ***Note: if more than $600 please submit W-9*** | **YES  NO** | Click or tap here to enter text. | Click or tap here to enter text. |
| **Honorarium** | **YES  NO** |  |  |
| **Deposit Required** | **YES  NO** |  |  |
| **Balance** |  |  |  |
| **Donation to SHRM Foundation** | **YES  NO** |  |  |
| **Total Travel Reimbursement** |  |  |  |
| **Will You Require Hotel Accommodations?** | **YES  NO** |  |  |
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| **HR Topic(s)** | Click or tap here to enter text. | | | |
| **Is this program virtual or in-person?** | Click or tap here to enter text. | | | |
| **Title(s) of Presentation** | Click or tap here to enter text. | | | |
| **Marketing & Promotional Blurb** | Click or tap here to enter text. | | | |
| **Program Description** | Click or tap here to enter text. | | | |
| **Learning Objectives** | Click or tap here to enter text. | | | |
| **Length of Presentation** | **1 hour**  **90 minutes  2 hours  Other \_\_\_\_\_\_\_** | | | |
| **Does BGSHRM have your permission to** **post your presentation on the BGSHRM website for members to access after the meeting?** | **YES  NO** | | **Comments** | |
| Click or tap here to enter text. | |
| **Does BG-SHRM have your permission to film and record your presentation to share with our members virtually?** | **YES  NO** | **Type digital signature here** | | |
| **Is this Program Certified by the HR Certification Institute?** | **YES  NO** | **If yes, please provide:**  **HRCI Activity ID**: Click or tap here to enter text. | | |
| **SHRM Chapter/Location**: | | |
| **Date**: | | |
| **Is this Program Certified by SHRM?** | **YES  NO** | **If yes, please provide:**  **SHRM Activity ID**: | | |
| **SHRM Chapter/Location**: Click or tap here to enter text. | | |
| **Date**: Click or tap here to enter text. | | |
| **Speaker Biography** | Click or tap here to enter text. | | | |
| **Speaker Headshot** | **Please insert here.** | | | |
| **Proof of Performance** | Click or tap here to enter text. | | | |
| **Social Media Information** | **LinkedIn:** | | | **Google+:** Click or tap here to enter text. |
| **Facebook** Click or tap here to enter text. | | | **Instagram:** Click or tap here to enter text. |
| **Twitter:** Click or tap here to enter text. | | | **Other:** Click or tap here to enter text. |
| **YouTube:** Click or tap here to enter text. | | | **Other:** Click or tap here to enter text. |
| **Would you like a separate display table?** | **YES  NO** | | |  |