Speakers Bureau Application

PROFESSIONAL

Professional's Information	Iravel / Participation Options	
Name:	☐ Yes, I am willing to travel	
Title:	\square Yes, I am willing to participate in focus groups	
Agency name:	Military	
Address:	•	
City/state/zip:	 Please check if you were or are currently enlisted in the US military. 	
Work phone:	· · · · · · · · · · · · · · · · · · ·	
Cell phone:		
Email:	MEDIA EXPERIENCE	
Occupation:		
Licensures, specializations, area of focus, etc.:	Are you willing to speak with:	
	□ TV	
Religion/communities of faith/other beliefs:	☐ Radio	
	☐ Newspapers	
Race:	☐ Magazines	
Ethnicity:	☐ Online	
Languages spoken:	☐ Webinars, panels, conferences	
Length of time in your current position:	Do you have experience speaking publicly (e.g., panels,	
What is your length of service in child welfare?	conferences)? If so, please list or provide links.	
What other areas or positions have you worked in within child		
welfare?		
Professional's Manager/Supervisor	Do you have experience speaking to the media? If so, please list or provide links.	
Name:		
Title:		
Agency name:		
Address:	Please list your local media outlets:	
City/state/zip:	Radio:	
Work phone:	TV:	
Cell phone:	Newspaper:	

Recognition

Have you received any awards or recognition? Please list.	
Any information that you provide totion will not be shared with anyone outside of	
I affirm that the information provided is true to the best of my knowledge as my signature and gives authorization for other representatives within my agency.	, ,, ,
Signature:	Date:
Signature:	Date:
SEND FORM TO:	

QUESTIONNAIRE FOR PROFESSIONALS

Tell us about yourself:
Discuss your current and past position(s) in child welfare.
Were you adopted or ever in foster care yourself?
What key messages do you hope to share?
Why are you interested in participating in the speakers bureau?
Tell us about your professional experience with foster care and adoption.