# Appendix B: Biographical Information Form

(Speakers/Presenters/Authors)

All speakers/presenters and authors are required to submit biographical information early in the event planning process. A previously prepared resume may be submitted in place of this form.

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| **Name with Credentials:** | Click or tap here to enter text. |

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| **Address:** | Click or tap here to enter text. | | | | | |
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| **Phone Number:** | | | Click or tap here to enter text. | | | |
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| **Email address:** | | Click or tap here to enter text. | | | | |
|  | | | | | |  |
| **Current Employer:** | | | | Click or tap here to enter text. | | |
|  | | | | | |  |
| **Current Position/Title:** | | | | | Click or tap here to enter text. | |

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| **Degrees** | **Institution**  **(Name, City, State)** | **Major Area of Study** | **Year Degree Awarded** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
|  |  |  |  |
| **Residency** | **Institution**  **(Name, City, State)** | **Major Area of Study** | **Year Degree Awarded** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

Use thespace below to briefly describe your professional experience or areas of expertise (including publications) related to your involvement in continuing education and your role, e.g., speaker, presenter, peer reviewer, administrator, etc. THIS PORTION IS REQUIRED – please explain your experience that qualifies you to speak on your subject.

Click or tap here to enter text.