

SPEAKING ENGAGEMENT REQUEST FORM

to request a California Civil Rights Department (CRD) speaker at your event



REQUESTOR / ORGANIZER

Contact Name: _____

Alternate Name: _____

Phone Number: _____

Phone Number: _____

Email: _____

Email: _____

INFORMATION ABOUT REQUESTING ORGANIZATION

Name of Organization: _____

Organization Website: _____

Description of Organization: _____

INFORMATION ABOUT EVENT

Event Title: _____

Start Date (required): _____ Start Time: _____ End Time: _____

End Date: _____ Start Time: _____ End Time: _____

Event/Registration Website: _____ Registration Fee?: Yes, \$ _____ No

Open to the Public?: Yes No Venue: _____

Address (Street, City, State, Zip): _____

Description of Event (required): _____

Audience Size: _____ Primary Language of Expected Audience: _____

Audience Type: Community Govt. Agency Legal/Professional Other: _____

Audience Knowledge of Topic (limited / knowledgeable / very knowledgeable): _____

Agenda / Schedule Available for Event: Yes No

(If yes, please provide a copy to speaking.engagements@dfeh.ca.gov)

■ **SPEAKER AND PARTICIPATION DETAILS**

Requested Speaker (if known): _____

Speaker Participation Format (keynote speaker, panel member, etc.): _____

Speaker Participation Date and Time: _____

Speaker Length of Participation: _____

Topic of Presentation: _____

Photo Needed: Yes No If yes, due date needed: _____

Biography of Speaker Needed: Yes No If yes, due date needed: _____

Audio / Video / Materials Needed: Yes No If yes, due date needed: _____

Will you need a master copy of speaker’s handout/materials prior to the event for reproduction and distribution (The master copy(s) will be sent electronically as a pdf)? If yes, due date needed: _____

■ **TRAVEL INFORMATION**

Recommendation(s) for hotel accommodations that provide government rates:

1. Hotel Name: _____ Phone Number: _____

2. Hotel Name: _____ Phone Number: _____

Closest Airport to the Event: _____

Map / Directions from the Airport to the Hotel and Event Location:

■ **ON-SITE CONTACT DURING EVENT**

Contact Name: _____

Email: _____

Phone Number: _____

Fax Number: _____

Today’s Date: _____

SUBMIT FORM

If no prompt appears when you click ‘SUBMIT FORM’, please save the document as a PDF and email it to speaking.engagements@calcivilrights.ca.gov or visit www.calcivilrights.ca.gov/serf/

NOTE: CRD staff cannot accept speaker fees, honorariums, or travel expenses. The external host may waive the speaker’s registration or conference fees.