

Continuing Education Speaker Application

Name: _____

First	Middle	Last	Suffix

Office: _____

Address	City	State/Province	ZIP/Postal Code
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Home: _____

Address	City	State/Province	ZIP/Postal Code
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If you have someone you would like us to contact to schedule your presentation and appearances, please give their name and contact information:

Name of institution (in chronological order)	Location (City, State/Province, Country)	Year of Graduation	Degree earned
University of California, Berkeley	Berkeley, California, United States	1968	B.S. in Chemistry
University of California, Berkeley	Berkeley, California, United States	1970	M.S. in Chemistry
University of California, Berkeley	Berkeley, California, United States	1972	Ph.D. in Chemistry
University of California, Berkeley	Berkeley, California, United States	1974	Postdoctoral Fellow
University of California, Berkeley	Berkeley, California, United States	1976	Assistant Professor
University of California, Berkeley	Berkeley, California, United States	1978	Associate Professor
University of California, Berkeley	Berkeley, California, United States	1980	Full Professor
University of California, Berkeley	Berkeley, California, United States	1982	Chairman of Department
University of California, Berkeley	Berkeley, California, United States	1984	Member of National Academy of Sciences
University of California, Berkeley	Berkeley, California, United States	1986	Member of American Academy of Arts and Sciences
University of California, Berkeley	Berkeley, California, United States	1988	Member of National Academy of Medicine
University of California, Berkeley	Berkeley, California, United States	1990	Member of National Academy of Engineering
University of California, Berkeley	Berkeley, California, United States	1992	Member of National Academy of Social Sciences
University of California, Berkeley	Berkeley, California, United States	1994	Member of National Academy of Humanities
University of California, Berkeley	Berkeley, California, United States	1996	Member of National Academy of Letters
University of California, Berkeley	Berkeley, California, United States	1998	Member of National Academy of Music
University of California, Berkeley	Berkeley, California, United States	2000	Member of National Academy of Visual Arts
University of California, Berkeley	Berkeley, California, United States	2002	Member of National Academy of Film and Television
University of California, Berkeley	Berkeley, California, United States	2004	Member of National Academy of Design
University of California, Berkeley	Berkeley, California, United States	2006	Member of National Academy of Architecture
University of California, Berkeley	Berkeley, California, United States	2008	Member of National Academy of Landscape Architecture
University of California, Berkeley	Berkeley, California, United States	2010	Member of National Academy of Urban Planning
University of California, Berkeley	Berkeley, California, United States	2012	Member of National Academy of Transportation
University of California, Berkeley	Berkeley, California, United States	2014	Member of National Academy of Public Administration
University of California, Berkeley	Berkeley, California, United States	2016	Member of National Academy of Public Health
University of California, Berkeley	Berkeley, California, United States	2018	Member of National Academy of Social Work
University of California, Berkeley	Berkeley, California, United States	2020	Member of National Academy of Education
University of California, Berkeley	Berkeley, California, United States	2022	Member of National Academy of Journalism
University of California, Berkeley	Berkeley, California, United States	2024	Member of National Academy of Media Arts

State or Province	Type of License/Certificate	License Number	Date obtained
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Has any state or province ever taken action against any of your chiropractic licenses? ☐ Yes ☐ No

The Trusted Leader in Chiropractic Education®

Qualifications:

List the subjects on which you feel qualified to speak:

Other Materials:

To be considered for acceptance as a speaker, please complete and return the following documents:

1. Speaker Application Form
2. Speaker Biography Form
3. Presentation Proposal Form
4. Current Curriculum Vitae
5. Copy of all chiropractic licenses, certificates or diplomas declared on the Speaker Application Form
6. Copy of all graduate level diplomas
7. Photo

If you have any published materials (e.g. books, videos, DVDs) or press kits, feel free to include these with your application.

Return entire speaker packet via fax at 563-884-5103, via email at continuinged@palmer.edu, or mail to:

Palmer College of Chiropractic
Continuing Education
1000 Brady Street
Davenport, IA 52803-5209

I certify that the information submitted on this application is true and complete to the best of my knowledge and belief, and I understand that falsification of any of the information contained herein shall be grounds for disqualification from further consideration or for my immediate dismissal. I authorize Palmer College of Chiropractic to conduct an investigation of my background and to verify my license(s) to confirm the information that I have provided. I also understand that if I am accepted as a speaker, my signature below authorizes Palmer College of Chiropractic to use my name and/or picture in marketing materials and any and all publications.

Signature _____

Date _____

For Office Use Only:

Date Reviewed: _____ Reviewer: _____

Date Reviewed: _____ Reviewer: _____

Continuing Education Speaker Biography

Speaker Name: _____

How often would you like Palmer College of Chiropractic to contact you for an update of your photo and biographical sketch?

☐ 1 Year ☐ 2 Years ☐ 5 Years

Biography:

Please attach a brief (50 words or less) biographical sketch for our marketing materials.

Photo:

E-mail a photo to continuinged@palmer.edu - must be

- 300 dpi resolution or higher
- in JPEG, TIFF, EPS or Adobe Photoshop format
- professional photo of you only

For Office Use Only:

Date Received: _____ Update Necessary On: _____

Date: _____ Reviewer: _____

Date: _____ Reviewer: _____

Continuing Education Presentation Proposal

Speaker: _____ Presentation length: _____

Presentation title: _____

Description:

In approximately 50 words, describe the main topic covered in your proposed presentation, as well as your aim in delivering it. You may attach a typed description if you wish. This will be used in our marketing materials.

Outline:

In standard outline format, briefly list an hourly/half-hourly "schedule" of your presentation. You may attach a typed outline if you wish.

For Office Use Only:

Course No. _____ Approved For Credit: ☐ Yes ☐ No ☐ N/A

Date: _____ Reviewer: _____

Date: _____ Reviewer: _____