

**FOR USE BY COVERED CALIFORNIA STAFF ONLY:**

**CC file #:**

**Intake by:**

**Intake date:**

**Speaker assigned:**

**Date materials sent:**

**Date speaker bio sent:**

**Speaker Request Form**

**Please complete as much information as you have about your event and speaker requirements and e-mail it to: Kelsey Lindelof, Stakeholder Engagement, Covered California at** **Kelsey.Lindelof@covered.ca.gov**

Date:

**About Your Organization:**

Sponsoring Organization:

Type of Organization:

Contact Name:

Contact Position:

Contact Phone/Fax Number:

Contact E-mail: ­­­­

Contact Address:

Website URL:

**Please Describe Your Program:**

Date of Program:

Time of Program:

Location of Program

Name of Program:

What is the Theme/Purpose of the Program:

Requested Speaker (if you are interested in a particular speaker):

Proposed Topic(s):

Time of Speaker’s Presentation:

Length of Presentation:

Presentation Format (panel, speech, roundtable, etc.):

**Audience Composition:**

Approximate Size of Audience Expected:

Is this program directed to consumers, stakeholders, health care practitioners, employers, other?

Languages Needs?

Will this event be videotaped?

Expected Media Coverage?

**Written Materials/Biography:**

Due Date for Written Materials & Biography:

E-mail address where written materials & biography can be sent: Audio/Visual Equipment:

If audio/visual is used, is the sponsor capable of making arrangements?

Due Date for Submission:

Contact Person for audio/visual arrangements:

**Additional Details: (i.e. directions, how early the speaker should arrive, where to report upon arrival etc.)**

**­**­­­­­­­­­­­­­­­­

**Please attach an agenda for your event.**