# Speakers Bureau Application

IFDA is pleased to offer professional members in good standing the opportunity to join the Association’s Speakers Bureau. The Association seeks individuals who will represent IFDA as resident experts in their chosen field related to the furnishings and design industry. IFDA staff and volunteers from the membership will carefully review each application form to evaluate each applicant’s qualifications for participating in the IFDA Speakers Bureau Program. Program candidates will be evaluated based on the information supplied on the Speakers Bureau Application Form. All candidates will receive notification via email from IFDA Headquarters advising them if they have been accepted to participate in the Speakers Bureau Program.

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| IFDA Member Contact Information | |
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| Name |  |
| Chapter Affiliation |  |
| Member Type (Professional, New Professional, Retired, Emeritus) |  |
| Membership ID Number |  |
| Company Name |  |
| Street Address |  |
| City ST ZIP Code |  |
| Work Phone |  |
| Home Phone |  |
| E-Mail Address |  |

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| Speaker’s Area of Expertise | |
| Please describe your area of expertise for speaking engagements: | |
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| Please list your speaker topics and/or title of your presentation and provide a brief outline: | |

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| Courses Approved for CEU Credits |

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| Are any of your presentations approved by the Interior Design Continuing Education Council (IDCEC) for CEU credits? If so, please list the NCIDQ registry number, number of credit hours approved and the name of the organization offering the credits (i.e. ASID, IIDA, IDC, and IDEC). In addition, please list any presentations approved by other organizations such as AIA. |

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| Evaluation Summary Details from Prior Speaking Engagements |

If applicable, please provide a copy of any evaluation summaries from prior speaking engagements

including the course number, the total number of individuals who attended and the overall   
 impression rating for the program.

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| Speaker Biographical Information |
| Please provide a brief biographical description. IFDA will include this information on the Speakers Bureau Section of the IFDA website. |

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| **Special Skills and Qualifications** |
| Summarize special skills and qualifications you have acquired from current or previous employment, volunteer work, or through other activities. Are you fluent in another language in addition to English? |
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| Audio Visual Requirements |

Please select your AV Requirements from the list below.

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| □ Lectern/Podium | □ Handheld Microphone #\_\_\_\_\_ |
| □ LCD Projector & Screen | □ Lavaliere Microphone #\_\_\_\_\_ |
| □ Internet Connection | □ Standing Microphone #\_\_\_\_\_ |

***Additional AV Requests:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| References |

Please include the contact information of two references that may attest to your capability   
 in instructional methods/design and learning processes, coupled with the ability to communicate content   
 effectively and at an appropriate level to the desired audience. IFDA staff will contact these references.   
 If we are unable to contact these references, your approval to participate in the IFDA Speakers Bureau

will be delayed. If you are approved to be included in the Speakers Bureau, the contact information for your references will be listed on your Speakers Bureau directory listing page on the IFDA website.

Your references should be someone who has attended one of your previous presentations or someone   
 outside of your company/firm who can speak to your presentation skills and professional background.

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| Photographs |

To include a headshot on your Speakers Bureau page, you will need to email your headshot photograph with your application to [linda@ifda.com](https://email25.godaddy.com/linda@ifda.com). Please note that photographs should be a vertical upright pose. It should be a  jpg, no smaller than 4 inches wide and 300 or above dpi.

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| Speaker Fees |

Fees paid to a member of the IFDA Speakers Bureau will be mutually determined between the program participant and the organization hiring the speaker.

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| Agreement and Signature | |
| By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a speaker, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate removal from the IFDA Speakers Bureau Program. | |
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| Name (printed) |  |
| Signature |  |
| Date |  |

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| Please contact Jennifer Jones, MPA, IFDA Executive Director if you have any questions about the Speakers Bureau Program at [linda@ifda.com](mailto:linda@ifda.com) or 610-992-0011. Thank you for completing this application form and your interest in the IFDA Speakers Bureau. |