



## Speaker's Bureau Request Form

### Contact Information

*First name:*

*Last name:*

*Email address:*

*Work phone number:*

*Organization:*

*City:*

### Presentation Information

*Requested date:*

*Requested time:*

*Presentation topic(s):*

- |                                                                       |                                                                                                                          |
|-----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <i>The role of the College/ CRTO Update</i>  | <input type="checkbox"/> <i>The RT in an Interprofessional Model of Care</i>                                             |
| <input type="checkbox"/> <i>Documentation</i>                         | <input type="checkbox"/> <i>Authorizing Mechanisms (e.g., medical directives)</i>                                        |
| <input type="checkbox"/> <i>Scope of Practice</i>                     | <input type="checkbox"/> <i>Relevant legislation, regulations and regulatory requirements (e.g. liability insurance)</i> |
| <input type="checkbox"/> <i>Standards of Professional Practice</i>    |                                                                                                                          |
| <input type="checkbox"/> <i>Professional Ethics</i>                   |                                                                                                                          |
| <input type="checkbox"/> <i>Registration Requirements and Process</i> |                                                                                                                          |
| <input type="checkbox"/> <i>Quality Assurance Program</i>             |                                                                                                                          |
| <input type="checkbox"/> <i>Members Responsibility as an Educator</i> |                                                                                                                          |

*Other* \_\_\_\_\_

*Length of presentation (in minutes):* \_\_\_\_\_

*Anticipated audience:*

- RTs only*                       *Multidisciplinary*