

MISSOURI ASSOCIATION OF SCHOOL PSYCHOLOGISTS

Speaker's Bureau Application

Date of Application _____

Return form to: Anne Gardner
7341 W. Farm Road 112
Springfield MO, 65802
or: angardoc@aol.com

Name _____	E-Mail _____
Address _____	Current Position _____
City _____	_____
Phone number (H) _____	(W) _____
Educational Background _____	

List of Topics (in order of expertise)

Topic	Length	Target Audience
1.		
2.		
3.		
4.		
5.		

Have you presented these topics previously? Please list location/event.

Would you be available for a media interview or article relative to these topics?

On a separate page(s), please provide abstracts (brief summaries) of each of the presentations you have listed.

Thank you so much for volunteering to be part of the MASP speaker's bureau!!