

## DSC Speaker Request Form

Thank you for your interest in the Disparities Solutions Center at Massachusetts General Hospital ([www.mghdisparitiessolutions.org](http://www.mghdisparitiessolutions.org)). To help us manage requests for speakers we ask that you complete the form below with as much detail as possible. Please return to:

Surie Johnson

[stjohnson@partners.org](mailto:stjohnson@partners.org)

<b>Contact Person</b>	
<b>Organization</b>	
<b>Phone Number</b>	
<b>Email Address</b>	
<b>Name of Meeting/Event</b>	
<b>Date(s) of Meeting/Event</b>	
<b>Location of Meeting/Event</b> <i>(City/State or virtual)</i>	
<b>Brief Description of Meeting/Event</b> <i>(Audience, size, etc.)</i>	
<b>Topic</b> <i>(Please specify what topic(s) you would like to speaker to address and any contextual information the speaker should know)</i>	
<b>Speaker Requested</b>	
<b>Please indicate the type of engagement</b> <i>(keynote, panel, lecture, web seminar, etc)</i>	

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<b>Length and Time of Speaking Engagement</b>	
<b>Amount of honorarium offered for speaker's time</b> <i>(To cover speaker's time and any preparation for the presentation (including prep calls) we generally encourage an honorarium/stipend)</i>	
<b>Please specify the travel expenses that will be covered</b> <i>(Flight, hotel, transportation, etc.)</i>	
<b>Type of Organization</b> <ul style="list-style-type: none"><li>• Hospital (please indicate whether public, nonprofit, for profit)</li><li>• Health plan (please indicate whether Medicaid)</li><li>• Community health center (please indicate whether FQHC)</li><li>• Community based organization</li><li>• Government organization</li><li>• Other (please indicate organization type)</li></ul>	
<b>Any other information you would like to share?</b>	
<b>How did you hear about us?</b>	