**AHIA Virtual Learning Speaker Form**

**Thank you for your interest in presenting an AHIA sponsored webinar.**

**Please complete this form and return to** **hlundgren@kellencompany.com**

**One form must be completed for each session.**

|  |
| --- |
| **SPEAKER INFORMATION (copy this section as needed if multiple speakers will present)** |

|  |  |
| --- | --- |
| **Name:**  |  |
| **Credentials:** |  |
| **Title:** |  |
| **Organization:** |  |
| **Contact Information:** | **Phone:** |  |
| **E-mail:**  |  |
| **Mailing Address:***(City, State, Zip & Country)* |  |
| **Speaker Biography** *(Your bio should be 100-150 words, do* ***NOT*** *attach your resume or type “see attached”):* |

|  |
| --- |
| **SESSION INFORMATION**  |

|  |  |
| --- | --- |
| **Session Title:** |  |
| **Session Synopsis:** *(100-150 words)* |
| **Keywords:** *3 keywords are required* |  |
| 1. **Have you previously presented this exact same presentation for AHIA or any other organization/institution?**

**[ ]  Yes** **[ ]  No**1. **If you answered “Yes,” where and when did you give this presentation?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |

|  |
| --- |
| **SESSION INFORMATION (Continued)** |
| Level: *(Double click on appropriate level)***[ ]  All** **[ ]  Introductory****[ ]  Professional** **Level descriptions:*** **All:** Session provides information that will benefit all levels of knowledge and experience.
* **Introductory:** Learning activity level most beneficial to auditors new to a skill or an area. These individuals are often at the staff or entry level in organizations, although such programs may also benefit a seasoned professional with limited exposure to the area.
* **Professional:** Learning most useful for individuals with detailed knowledge in an area or topic. Professional level programs are often appropriate for mid and senior level professionals within an organization; however, they may also be beneficial for other professionals with specialized knowledge in a subject area.

**Prerequisites:**Please describe any prerequisites for this session*[ ]* **None****[ ]  As Follows:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Please list any deliverables, such as checklists, audit templates, that you will provide along with your Power Point presentation:****[ ]  Procedures/Guidelines****[ ]  Audit Templates/Reports****[ ]  Resources** | Length: *(Double click on appropriate length of time)***[ ]  50 minutes** **[ ]  100 minutes** **[ ]  Other, please list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Session Format:** **[ ]  Group-Internet Based****[ ]  Other, please list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Session Content:** *[ ]* **Theory****[ ]  Practice****Field of Study (Select Only One):** *[ ]* **Auditing****[ ]  Specialized Knowledge****[ ]  Auditing Governmental****[ ]  Accounting****[ ]  Accounting Governmental****[ ]  Behavioral Ethics***[ ]* **Finance****[ ]  Personal Development****[ ]  Information Technology****[ ]  Business Management and Organization****[ ]  Business Law***[ ]* **Economics****[ ]  Management Services****[ ]  Regulatory Ethics****[ ]  Statistics****[ ]  Taxes****[ ]  Communications and Marketing****[ ]  Computer Software and Applications****[ ]  Personnel/Human Resources****[ ]  Production** |
| **Target Audience Description** *(who should attend):* |
| **Learning Objectives:** *(please provide 3 objectives at minimum)*The objective provided will be used for promotion of your session along as well as a template for evaluation of how well your session meets the stated objectives. Learning objectives should (1) focus on the learner, and (2) contain action verbs that describe measurable behaviors. * **Verbs to consider when writing learning objectives:** list, describe, recite, write compute, discuss, explain, predict apply, demonstrate, prepare, use analyze, design, select, utilize compile, create, plan, revise assess, compare, rate, critique
* **Verbs to avoid when writing learning objectives:** know, understand, learn, appreciate, become aware of, become familiar with
 |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| **ADDITIONAL DETAILS:** |

|  |
| --- |
| **Please indicate if you have any date/time preferences or restrictions:** **Please let us know anything else the Virtual Learning Committee needs to know about this session:** |
|  |

**­­­**

|  |
| --- |
| **PRESENTER AGREEMENT/AUTHORIZATION:** |

|  |
| --- |
| We ask for your advanced agreement to expand AHIA authority to provide the educational content to AHIA members through additional delivery methods, inclusive of the AHIA certification and Virtual Learning programs. \*Nothing in this agreement shall be construed as limiting, negating or otherwise restricting the Presenter’s right to present the same or similar material as presented in the presentation in any other media, setting, or venue at any point in time. **Please indicate your agreement/authorization of the following below:**“I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Presenter’s Name], hereby authorize AHIA and/or its agent(s) the right to record this webinar and use materials, name and likeness. I hereby grant AHIA a perpetual, royalty-free license to record, use, sell, reproduce and distribute this Presentation (including the video and/or audio recording of the Presentation and all handouts and presentations). I further grant permission to AHIA to make the recording of this Presentation, handouts and related materials available online through the AHIA website, for fee or free to AHIA members and non-members.” *[ ]* **I authorize AHIA permission as stated above.****[ ]  I do not authorize AHIA permissions as stated above.**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\**Acceptance or declination of this agreement will not prohibit you from presenting this webinar.*  |

|  |
| --- |
| *For office use only:* |

|  |  |
| --- | --- |
| AHIA body of knowledge subject matter area classification:*[ ]*  Business Aspects of Care Setting*[ ]*  Revenue Cycle: Health Insurance Provider*[ ]*  Revenue Cycle: Health Care Provider*[ ]*  Regulatory Environment: Regulatory Bodies & Regulations*[ ]*  Core Business Functions: Operational/ Financial*[ ]*  Core Business Functions: Information Technology*[ ]*  Core Business Functions: Compliance*[ ]*  Core Business Functions: Administrative FunctionsInclude in LMS *[ ]*  Yes *[ ]*  No |  *[ ]*  General Webinar *[ ]*  Tech Talk *[ ]*  AHIA Epic User Group *[ ]*  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |