



(Agency Name) Speaker Request Form

Thank you for your interest in having a (agency name) speaker at your event. In order to help us facilitate your request, please complete and submit the following form (and any corresponding attachments) to (agency email address) **at least 2 weeks prior to the event**, and allow 3-5 business days for decisions to be made.

Name of Organization Submitting Request	
Event Sponsor(s)	
For Profit/Nonprofit	
Coordinator/Point of Contact <i>(Name, title, email, office phone, cell phone)</i>	
Event Name/Title	
Event location <i>(Address, or virtual information)</i>	
Event Date/Time & Time Zone	
Event Type <i>(Conference, dinner, small group, etc.)</i>	

Event purpose/Goal	
Event website	
Agency Requested topics	<p>Insider Risk</p> <p>Surface</p> <p>Checkpoint Strategy</p> <p>Utilizing Authorities to Better Execute Mission</p> <p>Improved Outcome-Focused Policy Development, Compliance and Oversight</p> <p>Workforce Support</p> <p>Cybersecurity</p> <p>Crisis Management</p> <p> COVID-19</p> <p> Hurricanes</p> <p> Wildfires</p> <p>REAL ID</p> <p>Precheck</p> <p>TSA 101</p> <p>Civil Rights and Liberties</p> <p>Unmanned Aircraft Systems</p> <p>Federal Air Marshals</p> <p>Other</p>

Presentation format (<i>Keynote address, roundtable, panel, etc.</i>)	
Expected duration	
Question and Answer (<i>Will the speech be followed by a Q&A session?</i>)	
Audience (<i>Approximate number of attendees, also describe the make-up and if membership is required.</i>)	
Honorable guests (<i>List names and titles of members of Congress, CEOs, or other VIPs participating in, or attending the event.</i>)	
Media (<i>Will media be invited to the event? If so, describe and submit a media list.</i>)	
Other Notes, (Please include the cost of attendance for audience members, if any; specify whether a release form is required; if travel reimbursement offered, please specify; and feel free to include any other relevant information you would like to provide.)	

Paperwork Reduction Act Burden: TSA will use the information to collect information on the requestor and the event a speaker would attend. This is a voluntary collection. It is estimated that the total annual burden per response associated to this collection is approximately 10 minutes. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information, unless it displays a valid OMB control number. The control number assigned to this collection is OMB-1652-xxxx, which expires x/xx/xxxx. Send comments regarding this burden estimate or any other aspect of this collection of information including suggestions for reducing this burden to TSA PRA Officer, 6595 Springfield Drive, Springfield, VA 20598-6011. ATTN: PRA 1652-xxxx.