

Speaker Course Submission Form

NOTES:

- **A course may be cancelled one week before the course date if there are not enough attendees.**
- **All lectures will be given Live via Zoom until further notice.**

In order to have all necessary information regarding your presentation for the purpose of publication and advertisement we request the following information to be emailed to ncarreno@temple.edu.

1. Speaker Name, Address, Cell Number, Email
2. Lecture Title
3. Lecture Synopsis/Course Description
4. Lecture Learning Goals (At least 3-5)
5. One paragraph bio sketch
6. Current CV for our files
7. Honorarium (If applicable)
8. Course Date
9. Course Time (1 hour, 3 hour, 6 hour, other):
10. Portrait photo for lecture flyer (.jpg format)

Do you grant permission to Temple University Kornberg School of Dentistry to use your photo, bio and other course information provided on this form for distribution via the course flyer, advertisement flyer and on our Continuing Education website? Yes No



**Temple
University**

Kornberg School of Dentistry

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*phone 215-707-7541
fax 215-707-7107*

Based on new ADA CERP compliance criteria, please read and initial after each statement.

Speaker must ensure that continuing dental education activities promote improvements in oral healthcare and not a specific drug, device, service or technique of a commercial entity. _____
Initial

Speaker must disclose any financial interests with companies, products, technology, etc. And if none, disclose such to attendees. _____
Initial

Speaker must support clinical recommendations with references to scientific literature wherever possible and further disclose risks/benefits. _____
Initial

Speaker must attest that images used in CE activities have not been falsified to Mis-represent treatment outcomes. _____
Initial

Speaker will provide contact information (phone, fax, email) to participants for follow up with questions and/or concerns. _____
Initial

Hands-on participation courses must have a ratio of at least one instructor per fifteen participants. _____
Initial