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**AAMU Department of Psychology & Counseling**

**Professional Development Speaker Series Submission Form**

Thank you for your interest in being a featured speaker for the Alabama A&M University Department of Psychology & Counseling Professional Development Series! Please complete the form below to provide us with your areas of expertise and preferred topics for presentation.

**Contact Information:**

* Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Credentials (LPC, LMFT, Psy.D., Ph.D., etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Organization/Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Professional Background:**

1. **Brief Biography:**
Please provide a short bio (150-200 words) outlining your professional background, expertise, and current role.
2. **Clinical Areas of Expertise:**
Please select the areas that best describe your clinical expertise (check all that apply):
	* ☐ Anxiety
	* ☐ PTSD
	* ☐ Depression
	* ☐ Eating Disorders
	* ☐ Trauma Models/Interventions
	* ☐ Burnout/Compassion Fatigue
	* ☐ Suicide Models/Prevention
	* ☐ Psychological Assessment/Testing (ADHD, Depression, Bipolar, etc.)
	* ☐ Developmental Disabilities/Neurodivergence (ADHD, Autism, etc.)
	* ☐ Treating Asian/Black/Special Populations
	* ☐ Correctional Mental Health
	* ☐ First Responder Mental Health
	* ☐ Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **Supervision & Training:**
Please indicate any experience or expertise you have in clinical supervision or training techniques (check all that apply):
	* ☐ Clinical Supervision Models
	* ☐ Supervision Tools and Techniques
	* ☐ Evidence-Based Clinical Training Techniques
	* ☐ Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **Presentation Topics:**
Please indicate which topic(s) you are interested in presenting (check all that apply):
	* ☐ Evidence-Based Treatments for Anxiety, PTSD, Depression, etc.
	* ☐ Trauma Interventions/Models
	* ☐ Burnout and Compassion Fatigue in Clinicians
	* ☐ Suicide Prevention Models
	* ☐ Ethical/Legal Obligations in Counseling
	* ☐ Psychological Assessment/Testing (ADHD, Depression, Bipolar, etc.)
	* ☐ Neurodivergence and Developmental Disabilities (ADHD, Autism, etc.)
	* ☐ Special Populations (e.g., Black, Asian, LGBTQ+)
	* ☐ Correctional Mental Health/First Responders
	* ☐ Day in the Life of a Psychologist/Private Practitioner
	* ☐ Starting a Private Practice
	* ☐ Landing an Internship
	* ☐ Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. **Preferred Presentation Format:**
Please select your preferred presentation format:
	* ☐ Webinar (Online)
	* ☐ In-Person
	* ☐ Hybrid
6. **Availability:**
Which schedule would work best for you?
	* ☐ Monthly Sessions
	* ☐ Bi-Monthly Sessions
	* ☐ Fall Semester Only
	* ☐ Spring Semester Only
	* ☐ Summer Semester Only
	* ☐ Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. **Additional Information:**
Please provide any additional details you would like us to consider (optional):