Section 1 of 4

Speaker Request Form: *All of Us* Research Program

Thank you for contacting the *All of Us* Research Program to request a speaker for your event. This form helps us collect relevant details about your event so that we can streamline our internal tracking and ensure we provide the best speaker and presentation for you and your audience.

We appreciate you taking the time to complete this form. We do our best to reply to all inquiries and will be sure to respond to those aligned with our expertise and program objectives. Please contact AoU_Visibility@nih.gov with any questions.

NOTE: Please spell out all acronyms

Event Host *
The organization running/leading/hosting the event

Short answer text

Type of Organization (select all that apply): *

☐ Advocacy

☐ Community-based

☐ Education

☐ Faith-based

☐ Government (federal, state, or local)

☐ Healthcare

☐ Professional / Industry

☐ Research

☐ Other…

Geographical Scope *

○ National Organization

○ Regional Organization

○ Local Organization

○ Other…

Organizer Contact Person Name *

Short answer text

Best phone number *
Please enter a valid phone number +1 (000) 000-0000, and indicate cell or office

Short answer text

Email *
example@example.com

Short answer text

Website (for organization and/or event) *

Short answer text

Primary Event Sponsors? *

Short answer text

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Description of Event

Description (optional)

Name of Event *

Short answer text

Is this event in-person or virtual? *

○ Virtual

○ In-person

○ Hybrid

Are you requesting the speaker attend in-person or virtually? *

○ Virtual

○ In-person

○ Either virtual or in person

Location of Event *

Street Address, City, State

Long answer text

Type of Event (select all that apply) *

☐ Community Meeting / Forum

☐ Conference

☐ Dinner / Gala

☐ Grand Rounds

☐ Leadership Meeting

☐ Lecture

☐ Luncheon

☐ Reception

☐ Training / Workshop

☐ Webinar

☐ Other…

Number of Anticipated Attendees *

Short answer text

Audience Composition (select all that apply) *

☐ Academics / Professors

☐ Community Members

☐ Government Officials

☐ Industry

☐ Physicians / Providers

☐ Researchers

☐ Students / Trainees

☐ Other…

Please briefly describe the audience based on the selections above. *

Long answer text

Event Start Date *

Month, day, year 📅

Event End Date *

Month, day, year 📅

Date and Time of Speaker's Session (include start/end time, time zone, and if scheduled time *
is flexible)

Short answer text

After section 2 — Continue to next section ▾

Event Logistics ⌄ ⋮

Description (optional)

If there is a specific program official from the *All of Us* Research Program that you prefer to speak at this event, please write their name(s) and title(s).

≡ Paragraph ▾

Long answer text

⎘ 🗑 Required ⚪ ⋮

If your preferred speaker is unavailable, would you be open to a surrogate speaker? *

◯ Yes

◯ No

Does the speaker need to register for your event? *

◯ Yes

◯ No

Type of Presentation: *

☐ Fireside Chat

☐ Keynote

☐ Moderator

☐ Opening Remarks

☐ Panel

☐ Plenary

☐ Podcast

☐ Workshop

☐ Other…

Topics that event organizers would like the presenter to address: *

☐ All of Us Research Program general overview

☐ All of Us Researcher Workbench

☐ Communications and marketing

☐ Data management and technology

☐ Engaging underrepresented communities in biomedical research

☐ Genetics and genomics

- [ ] Health equity, diversity, and inclusion
- [ ] Participant experience, user experience, and the participant perspective
- [ ] Pediatrics
- [ ] Precision medicine
- [ ] Public health policy and outcomes
- [ ] Researcher outreach and engagement
- [ ] Research projects using All of Us data
- [ ] Other…

Please provide details on the topic(s) you would like the presenter to address. *

Long answer text

The *All of Us* research program is committed to including individuals that have traditionally been underrepresented in biomedical research such as those listed below. Would you like the speaker's presentation to focus on or address issues or concerns that may be of importance to any of the following populations? If yes, please select all that apply. *

- [ ] Individuals that identify as American Indian / Alaska Native
- [ ] Individuals that identify as Asian
- [ ] Individuals that identify as Black
- [ ] Individuals that identify as Hispanic
- [ ] Individuals that identify as Middle Eastern / North African
- [ ] Individuals that identify as Native Hawaiian and Pacific Islander
- [ ] Individuals that identify as Multiracial or more than one race/ethnicity
- [ ] Individuals with challenges accessing healthcare
- [ ] Individuals with education levels below a GED
- [ ] Individuals with lower incomes
- [ ] Individuals from rural communities
- [ ] Individuals that self-identify as a sexual gender minority
- [ ] Individuals that self-identify as intersex
- [ ] Individuals that self-identify with a disability
- [ ] Individuals that are 65+ years of age or older
- [ ] Not sure
- [ ] N/A
- [ ] Other…

Are slides needed? *

- ( ) Yes
- ( ) No

How much time does the speaker have for the session? *

Short answer text

Will there be a prep session? If so, when will the session be held? *

Short answer text

After section 3   Continue to next section   ⌄

Section 4 of 4

Other Event Information

Description (optional)

Please share some information about other relevant speakers *

E.g. who will introduce? Other speakers in this segment? Other notable speakers at this event, past or present?

Long answer text

Are there any elected officials (e.g. Members of Congress, local elected officials) expected to attend? If so, please provide a list.

Short answer text

Are press invited to attend? *

○ Yes

○ No

Please describe any legal disclosures required (e.g. photo release forms, financial disclosures, etc.)

Short answer text

Will an *All of Us* Program Partner be involved?

E.g. Health Care Provider Organization, Community and Prover Gateway Initiative Partner, NIH Institute or Center, Champion, etc.

Short answer text

Has *All of Us* participated in this (or similar) event with your organization in the past? *

○ Yes

○ No

○ Not Sure

○ Other…

Please share links to any files relevant to the event that may aid in planning (e.g. agenda, run of show, disclosures, etc.). If needed, attachments can be sent via email to AoU_Visibility@nih.gov.

Short answer text

What is the deadline to reply to this request? *

Month, day, year

Anything else we should know?

Long answer text