



# CLE SPEAKER APPLICATION

for ATLA Education Programs

## SECTION I Personal Information

Name \_\_\_\_\_

Firm/Company \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email Address \_\_\_\_\_

Years in practice \_\_\_\_\_ ATLA member:  YES  NO

Designations: (check all that apply)

- Judge
- Paralegal
- Law Professor
- Trial Consultant
- Expert

For programming diversity, please indicate if you are a

- Minority
- Female

## SECTION II Practice Areas/Interests

- Administrative Law
- Arbitration/ Mediation/Settlement
- Aviation
- Civil Rights
- Class Actions
- Commercial/Business Law
- Domestic Relations
- Employment
- Environmental/Toxic Torts
- ERISA
- Ethics
- Evidence
- Expert
- Family
- Federal Tort Liability
- Health Law
- HMO
- Inadequate Security
- Injuries
- Insurance Law
- Law Office Technology
- Medical Negligence
- Motor Vehicle
- Nursing Home
- Pharmaceutical Litigation
- Premises Liability
- Products Liability
- Professional Negligence
- Railroad Law
- Social Security
- Traumatic Brain Injury
- Trial Advocacy Skills
- Workplace Injury/Workers Comp
- Other \_\_\_\_\_

**SECTION III** Speaker Qualifications

Please list associated certifications, affiliations, education, degrees or any other special qualifications:

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**SECTION IIII** Biography

Please include a short biography for publications and announcements. (May be attached.)

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Return this application to:

**ATLA**  
**1400 West Markham Street, Suite 307**  
**Little Rock, AR 72201**  
**(501) 372-0951 (facsimile)**

*Questions? Contact Jessie West at (501) 376-2852 or (800) 442-2852.*