



SPEAKER DISCLOSURE STATEMENT

TSHA requires that all presenters complete a disclosure statement prior to course approval. Please complete the below form and return it to your sponsoring organization.

COURSE TITLE:

COURSE ID:

COURSE DATE(S):

PRESENTER NAME:

PLEASE PROVIDE A SHORT BIO FOR YOURSELF (A separate document may be submitted):

HIPPA Statement: To comply with the Health Insurance Portability and Accountability Act (HIPAA), we ask that all program planners and instructional personnel insure the privacy of their patients/clients by refraining from using names, photographs, or other patient/client identifiers in course materials without the patient's/client's knowledge and written authorization.

I COMPLY WITH THESE POLICIES: Yes / No

FINANCIAL RELATIONSHIP: Relevant financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, gift, speaking fee, consulting fee, honoraria, ownership interest (e.g., stocks, stock options, or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial relationships can also include "contracted research" where the institution gets the grant and manages the funds and the individual is the principal or named investigator on the grant.

DO YOU HAVE RELEVANT FINANCIAL RELATIONSHIPS TO DISCLOSE? Yes / No

WHAT WAS RECEIVED: Salary / Consulting Fee / Intellectual Property Rights / Gifts / Royalty / Hold Patent on Equipment/ In Kind / Grants / Ownership Interest

FINANCIAL COMPENSATION OTHER:

FOR WHAT ROLE: (*Employment, Teaching & Speaking, Ownership Etc.*):

NON-FINANCIAL RELATIONSHIP DEFINITION: Relevant non-financial relationships are those relationships that might bias an individual including any personal, professional, political, institutional, religious or other relationship. May also include personal interest or cultural bias.

DO YOU HAVE RELEVANT NON-FINANCIAL RELATIONSHIPS TO DISCLOSE: Yes / No

NON-FINANCIAL RELATIONSHIP WITH (NAME OF COMPANY/ORGANIZATION/INSTITUTE):

NATURE OF NON-FINANCIAL RELATIONSHIP (*Personal, Professional, Political, Religious etc.*):

DESCRIPTION REQUIRED:

FOR WHAT ROLE: Volunteer Employment / Board membership / Volunteer membership on advisory committee or review panel / Volunteer teaching and Speaking / Volunteer Consulting / Other (Specify Below):

NON-FINANCIAL ROLE (OTHER):

ATTENTION STATEMENT:

- The information I provided in this disclosure is accurate at the time of completion.
- I will notify TSHA of any changes to this information between now and the presentation.
- This disclosure information will be reflected in the advertising and presentation materials for this course.

I AGREE WITH THE ATTESTATION STATEMENT: Yes / No

Please return this form to your sponsoring organization as soon as possible. CE Applications will not be reviewed until all speaker disclosure forms have been submitted.