

Employer Event/Presentation Request Form

Today's Date _____

Name of Company: _____

Department: _____

Contact Name: _____

Email: _____

Contact Number: _____

Topic: _____

Student Audience/Eligibility (*Highlight Selection*): • Freshmen • Sophomore • Junior • Senior

Mode of Presentation (*Highlight Selection*): : • Virtual • In-Person

Please list possible dates/times that you would like to hold your event/presentation:

Date of Presentation: _____ Time: _____

Date of Presentation: _____ Time: _____

Date of Presentation: _____ Time: _____

Please submit this form at least two weeks prior to the date of your requested event. Thank you for thinking of CSI Students, we will get back to you within two business days.