

# FACULTY SPEAKING ENGAGEMENT REQUEST FORM

Today's Date \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Department: \_\_\_\_\_

Topic: \_\_\_\_\_

**Student 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 host a presentation:**

Date of Presentation: \_\_\_\_\_ Time: \_\_\_\_\_

Date of Presentation: \_\_\_\_\_ Time: \_\_\_\_\_

Date of Presentation: \_\_\_\_\_ Time: \_\_\_\_\_

Please submit your request form at least two weeks prior to the date of the engagement you are requesting. Thank you for your request, you will hear back from us within two business days.