GUEST SPEAKER FORM

GUEST SPEAKER NAME
FIRM/COMPANY
PHONE NUMBER
MAILING ADDRESS
SOCIAL SECURITY #
TOPIC
MOST APPLICABLE PROGRAM
COURSE TITLE
DATE OF PRESENTATION
TIME OF PRESENTATION
LENGTH OF PRESENTATION FEE
CAN WE INVITE OTHER STUDENTS/STAFF?
CAN WE POST THIS INFORMATION?
<u>Signatures</u>
ACADEMIC DIRECTOR
TODAY'S DATE