

# Speaker Request Form

Form revised November 2016

**Type of Event** \_\_\_\_\_ **Date of Event** \_\_\_\_\_ **Calendar Year** \_\_\_\_\_

**Instructions for Speaker Clearance and Approval Process**

*Potential speakers are not to be contacted until official approval has been received. (For more information, see University Policies and Procedures 1-4: Guest Speaker.) Please complete steps for designated audiences; submit form to appropriate administrator for approval.*

<b>Classroom</b>	Steps 1 and 2	Department Chair
<b>Academic Department</b>	Steps 1 and 2	Department Chair & College Dean
<b>Academic College</b>	Steps 1 thru 4	College Dean & Academic Vice President
<b>Activities Program</b>	Steps 1 and 2	Student Activities Council & Managing Director of Student Activities
<b>Activities Event /Campus-wide</b>	Steps 1 thru 5	Managing Director of Student Activities & the Student Services and Activities Vice President
<b>Campus-wide</b> (Devotionals, Forums, etc.)	Steps 1 thru 5	President's Council, Executive Committee, & Board of Trustees

**1: General Information** *(To be completed by the individual making the recommendation. Do not make any contact with the speaker.)*

Requested Speaker:	Address:
Church Member: Yes ___ No ___	Church Position and Background:
Ward:	Stake:
Bishop's Name:	Stake President's Name:
Professional Experience: (Attach additional information if needed)	Pertinent Biographical Data: (Attach additional information if needed)
Name of individual who has heard this person speak:	Speaking Ability: Very impressive ___ Impressive ___ Average ___
Submitted by:	Phone: Department/Area:
Signature:	Date:

**2: Approval by Academic / Administrative Area**

Suggested Topic:	Justification/Concerns:
Target Audience:	Authorized Signature: Vice President, Dean, Chairman, or Director

**3: Approval by Appropriate Vice President** *(if required)*

Vice President Signature:	Date:
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**4: Ecclesiastical Clearance by University Relations** *(Required for Campus-wide Event)*

Current Church Position:		
Clearance: Yes ___ No ___	Signature:	Date:

**5: President's Council / Executive Committee / Board of Trustees Approval** *(if required)*

President's Council	Denied Date:	Approval Date:
Executive Committee	Denied Date:	Approval Date:
Board of Trustees	Denied Date:	Approval Date: