**Office of the Provost**



**Office Use Only**

Date Received:

Reviewer:

Yes or No:

RSVP Date:

|  |  |
| --- | --- |
| Speaker Request Form **Please fill out the form completely** | |
|  | |
| **Event Name** | |
|  | |
| **Event Date Event Time Event Location** | |
|  | |
| **Rehearsal (Y/N)? If so, prep time and location** | |
|  | |
| **Estimated Time of Speech Timeframe for Speech** | |
|  | |
| **Alternate speaker to Provost (in case Provost cannot make or event assessed as not a good fit for Provost)** | |
|  | |
| **Event Contact Person (Please provide all: name, phone, mobile, email)** | |
|  | |
| **Complete Event Description (context, history, meeting purpose)** | |
|  | |
| **Audience: Who will be in audience? Special people scheduled to attend? VIPs?** | |
|  | |
| **Agenda (including other speakers and speaking order) & Provost’s expected role in the meeting** | |
| Please outline agenda here. Additionally, you can attach the full agenda via email. | |
| **Speech content: Suggested areas/topics speech should consider** | |
|  | |
| **Facts & figures to support remarks (if applicable)** | |
|  | |
| **Notes and additional suggestions** | |
|  | |
| **Attire** | **Gifts or Special Traditions** |
|  |  |

Please return the completed form to 116 Hullihen Hall, University of Delaware, Newark, DE 19716 or email it to Joan Stock at [joans@udel.edu](mailto:joans@udel.edu).