



Worcester Polytechnic Institute

You are receiving this form because you are requesting to host an external speaker, performer or artist. Please fill out the form completely and return it to the authorized approver of your organization/department.

Date of Request (Today's Date)

Event Details

Event Title 25Live Ref. #
*if available

Primary Date(s) Requested Alternate Date(s) Requested

Event Start Time Event End Time

Preferred Location Alternate Location

Number of attendees

Will this event occur in a series?
☐ NO
☐ YES:

Is it directly connected to another event on campus?
☐ NO
☐ YES

Will there be a charge for those attending the event?
☐ NO
☐ YES

Is it open to the public?
☐ NO
☐ YES:

If yes, what portion of your guests will be external?
☐ Less than 50%
☐ Greater than 50%

Will there be advertisements or communications publicizing the event?
☐ NO
☐ YES

Contact Information

Sponsoring Org./Dept. Co-Sponsoring Org./Dept.

Primary Planning Contact:

Email Phone

Proposed External Speaker, Performer or Artist

Name

Organization Associations

Provide a brief description of the content of your event involving external speaker, performer, or artist:

Description of Speaker/Bio

Copy of Speaker's C/V or Resume:

Approval:

X _____ (Signature) _____ (Print Name)

Email: _____ Phone: _____

