

REQUEST FOR AUTHORIZATION TO EXTEND INVITATION
Office of Student Involvement and Leadership
Troy University

This form is to be completed by the President (or designee) of any organization desirous of inviting an outside speaker to campus.

Sponsoring Organization: _____

To which of the following categories does your organization belong? (Check one).

____ Academic Department ____ Faculty group ____ Staff Organization
____ Student Organization. Is it officially approved this quarter by the University? _____

President _____

Mailing Address _____ Phone _____

Faculty Advisor _____

Campus Address _____ Phone _____

Co-sponsor(s) if any _____

Proposed program date _____ Time _____

Facility Requested _____

Name of proposed speaker(s) _____

Official Position _____

If the speaker is representing or under the auspices of any organization other than the one with which he/she has an official position, what is it?

Speaker's proposed
topic _____

Please indicate the proposed speaker's academic background and experience in the area with which his/her proposed address is concerned. _____

Check one: _____ This program is for faculty, staff and students ONLY.
_____ This program is for the general public.

Signature of faculty or staff sponsor _____ Date _____

DO NOT WRITE BELOW

REQUEST RECEIVED ON _____ APPROVED _____ DISSAPPROVED _____
DIR OF STUDENT INVOLVEMENT&LEADERSHIP _____ DATE _____