



FOR ULC USE ONLY

Date request received: _____

Date discussed: _____

Date of follow-up: _____

CALL FOR LECTURERS FORM

Information of Proposing Individual/Organization:

Name: _____ Date: _____

University affiliation: _____

Phone: _____ Email address: _____

Name of speaker: _____

Occupation of speaker: _____

Contact Information for Lecturer or Agent (if known):

Name: _____

Phone: _____

Email address: _____

Name: _____

Phone: _____

Email address: _____

Suggested topic of lecture (if known):

Relevant websites containing more information on speaker:

List any contributions (in-kind funding or services) or ways to incorporate the lecturer across campus: _____

Would you like to be contacted about progress on this application? YES NO

Please attach a brief biography of speaker.