

## SPEAKER/PRESENTER WORKSHEET

Speaker Information	
Name of Speaker	
Department/School	
Contact Person	
Phone Number	
Alternate Phone Number	
“Day of” Phone Number	
Fax Number	
Mailing Address	
Email Address	
Presentation Title	
Presentation Date	
Presentation Time	
Presentation Length	
Presentation Location	
Presentation Confirmed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will have a Guest List?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Diet Restrictions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Request Rehearsal?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Who will Greet Speaker?	

Requirements		
Lectern	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Microphone	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Mic Type:	<input type="checkbox"/> Lavalier	<input type="checkbox"/> Lectern Mic <input type="checkbox"/> Handheld Mic
Data Projector	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Mail Disk w/ Presentation	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Bring Own Laptop	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Slide Projector # _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Slide Tray # _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Video Playback Equipment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Format:	<input type="checkbox"/> VHS	<input type="checkbox"/> DVD <input type="checkbox"/> Betacam
Laser Pointer	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Who will run A/V presentation?	_____	

Checklist	Completed	Date
Review Schedule/Q&A	<input type="checkbox"/>	____/____/____
Discuss Presentation	<input type="checkbox"/>	____/____/____
Obtain Presentation Title	<input type="checkbox"/>	____/____/____
Obtain Presentation Synopsis	<input type="checkbox"/>	____/____/____
Obtain Speaker Bio	<input type="checkbox"/>	____/____/____
Obtain Speaker Photo	<input type="checkbox"/>	____/____/____
Confirm Transportation Needs	<input type="checkbox"/>	____/____/____
Discuss Rehearsal Schedule	<input type="checkbox"/>	
Send Letter Confirming Logistics	<input type="checkbox"/>	____/____/____