



# SPEAKER/TOUR REQUEST FORM

**Please complete one form per company.** Submit this request as soon as possible by filling out this form and email to [Lhass@unitedwaysiouxland.com](mailto:Lhass@unitedwaysiouxland.com) or fax to 712.255.3028

**DATE NEEDED:**

**STAFF/VOLUNTEER:**

**COMPANY:**

**ADDRESS:**

**PLEASE SELECT HOW TO CONFIRM THIS REQUEST & FILL IN THE INFORMATION FOR SELECTED METHOD:**

**CONTACT:**

PHONE:

**PHONE:**

EMAIL:

**SELECT ONE:**

**PRESENTATION**

**TOUR**

**VIDEO CONFERENCE**

**TIME:**

**NUMBER OF EMPLOYEES:**

**DESCRIPTION (INCLUDE VIDEO CONFERENCE INFORMATION)**

## FUNDED PROGRAM SPEAKER REQUESTED

(PLEASE SELECT PROGRAMS IN ORDER OF PREFERENCE FROM DROP DOWN MENU)

**1<sup>ST</sup> PRIORITY:**

**2<sup>ND</sup> PRIORITY:**

**3<sup>RD</sup> PRIORITY:**

**DIRECTIONS TO ORGANIZATION AND SPECIFIC LOCATION OF PRESENTATION:**

## CONFIRMATION INFORMATION *(OFFICE USE ONLY)*

**AGENCY CONFIRMED:**

**DATE OF CONFIRMATION:**

**SPEAKER:**

**BY:**

**DATE OF REQUEST:**