

LEGISLATIVE AFFAIRS INFORMATIONAL

PRESENTATION REQUEST FORM

Please send both pages of this completed form to katherine.bolf@browardschools.com. A staffer will respond to all inquiries within 48 hours.

<u>Requestor Information:</u> Name:
Title:
School Name:
School Address:
School Telephone Number:
E-Mail:
Grade Level(s) being visited:
Amount of Students being visited:

Preferred Dates: *(please let us know your preferred dates and times for a presentation)*

Date	Start Time	End Time	Grades presented to

Additional Date Information: *(please let us know if there is anything we should be aware of regarding presentation times at schools)*

Additional Presentation Needs: *(Please let us know if you have additional needs regarding your requested presentation)*
