



**Guest Speaker Request Form
Classroom or School-Sponsored Activity**

Teacher/Sponsor: _____ Date: _____

Class/Activity: _____

Proposed Date and Time: _____

Speaker: _____

Speaker Affiliation: _____

Purpose and Message of Presentation: _____

Speaker Qualifications: _____

I have read school district policy regarding guest speakers and have complied or will comply with all of its requirements.

Teacher

Date

Principal

Date

Approved: _____

Denied: _____

Reason: _____
