

UCI Department of Film and Media Studies
SPEAKER REQUEST FORM

* FORM MUST BE COMPLETE AND BE APPROVED 2 WEEKS IN ADVANCE OF EVENT SPEAKER WILL BE CONTACTED TO FILL OUT VENDOR/PAYMENT INFORMATION THROUGH UCI'S FINANCIAL SYSTEM.*

NAME OF SPEAKER: _____

E-MAIL ADDRESS: _____ PRESENTATION FORMAT: In-Person ____ Virtual ____

POSITION: _____ AFFILIATION: _____
(University-School-Dept/Corporation/Company/etc.)

VISA STATUS: U.S. CITIZEN _____ INTERNATIONAL*: _____

*Please email Jennifer Choy for information related to payment of international speakers: jjchoy@uci.edu

IF THE SPEAKER IS A UNIVERSITY OF CALIFORNIA EMPLOYEE, PLEASE PROVIDE THE SPEAKER'S:

UC Employee ID#: _____

Dept. Payroll Contact Name: _____

Dept. Payroll Contact Phone # and E-mail: _____

BRIEF REASON FOR INVITING SPEAKER and SPEAKER BIO (may provide link for Bio):

IF SPEAKER PART OF A CLASS, PLEASE INDICATE THE COURSE # & QTR: _____

DATE OF TALK: _____ TIME: _____ ROOM: _____

TITLE OF TALK: _____

AUDIO/VISUAL EQUIPMENT: _____

PARKING PASS NEEDED: YES ____ NO ____

AMOUNT OF HONORARIUM REQUESTED \$ _____

(Maximum amount without exceptional approval: \$300)

I understand that I will be responsible for hosting my visitor, which includes greeting the visitor upon arrival, obtaining all information required for payment of honoraria, etc. If I am not available, I will arrange for an alternate host to meet and greet the visitor.

FACULTY HOST: _____ DATE: _____

ALTERNATE HOST: _____ DATE: _____

For office use:

*Approved: _____ DATE: _____

Lucas Hilderbrand, Chair

Account Info: _____