Monique Guillory, Ph.D.
President's Speaker Request Form

Keynote Address_____ Greetings/Welcome _____ Panel _____Other (specify) _____

Organization: _____

Requestor's Contact Info: _____

_____

Theme/Topic: _____

Day/date: _____ **Time (and zone):** _____

Event type: _____

Venue Address: _____

Will there be reserved parking for President Guillory? _____ Yes _____ No

If so, where? _____

Arrival time and contact person: _____

Time allocated for address: _____

Will you need: _____ Headshot _____ Bio _____ Email to: _____

Deadline: _____

Logistics / additional information:

_____

_____

_____

Please return this form to Dr. Kim Vaz-Deville, Chief of Staff at kvazdeville@dillard.edu.