Honors Week Event Information Form

If you would like some funding for your guest speaker from the Honors Program, you **MUST** return this form to the Honors Office by **MARCH 1, 2006**

Department Name: ______________________________________________________________

Contact Person: ___________________________________ Contact Phone: __________________

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**Event Information**

Title of Presentation: _____________________________________________________________

Brief Description of Presentation:

______________________________________________________________________________

______________________________________________________________________________

Name of Speaker: __________________________________________________________________

Title/Employer: ________________________________________________________________________________

Date of Presentation: ________________________________________________________________________________

Location: __________________________________________ Time: ___________

Is this event: Open to the Public ___________ or By Invitation only? ____________

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**Funding Request**

Total Funding Needed: $__________ Funding the Sponsoring Department Will Provide: $__________

Additional Funding Requested From Honors Program: $__________

Please provide any additional comments or justification for this funding that will help us to say “yes” to your request (use separate sheet if necessary):

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Please return this form to the Honors Office by **March 1, 2006**

**Honors Program**

NAU Box 5689
(928) 523-3334
Fax 523-6558

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