



NORTH CAROLINA AGRICULTURAL AND TECHNICAL STATE UNIVERSITY  
 1601 East Market Street  
 Greensboro, NC 27411

## SCHEDULING REQUEST FORM: CHANCELLOR JAMES R MARTIN II

### INSTRUCTIONS

- **PLEASE ALLOW THREE WEEKS FOR THE CONSIDERATION OF YOUR REQUEST.**
- Requests will not be confirmed more than six weeks in advance of the event.
- Complete this form in its entirety (**three pages**). An incomplete form will not be considered a formal request and the provided information will not be considered for scheduling.
- Press releases, advertisements, invitations, programs, photographs and other materials that use the chancellor's name/likeness or indicate his attendance at an event must be reviewed and approved by the Office of the Chancellor before being distributed.
- Attach to/with this form a copy of any available brochure, flyer, agenda or additional information related to the event and the chancellor's role.
- The chancellor's schedule is subject to change at any time due to university business and other responsibilities.

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### GENERAL CONTACT INFORMATION

Date of request \_\_\_\_\_

Name of requestor \_\_\_\_\_ Email address \_\_\_\_\_

Day phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Name of person responsible for event \_\_\_\_\_ Email address \_\_\_\_\_

Day phone \_\_\_\_\_ Cell phone \_\_\_\_\_

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### EVENT INFORMATION

Day (of the week) and date of event \_\_\_\_\_

Name of event \_\_\_\_\_

Brief description of event \_\_\_\_\_

Location \_\_\_\_\_

Location phone \_\_\_\_\_

Rain site (if outdoor event) \_\_\_\_\_

Rain site phone \_\_\_\_\_

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**EVENT INFORMATION, cont.**

Start time \_\_\_\_\_

End time \_\_\_\_\_

Time by which chancellor must arrive \_\_\_\_\_

Length of time required of chancellor  
(attach agenda) \_\_\_\_\_

Would it be beneficial for chancellor to remain  
throughout event? If yes, why? \_\_\_\_\_

Will dignitaries attend or participate?  
If yes, attach list with role at event. \_\_\_\_\_

Audience (include all possibilities) \_\_\_\_\_

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**THE CHANCELLOR'S ROLE**

Please check all that apply:

Preside over occasion \_\_\_\_\_

Bring greetings \_\_\_\_\_

Provide opening remarks \_\_\_\_\_

Deliver the occasion \_\_\_\_\_

Introduce speaker/participant \_\_\_\_\_

Introduce keynote speaker \_\_\_\_\_

Serve as moderator \_\_\_\_\_

Participate in a panel discussion \_\_\_\_\_

Present award(s)/honor(s) \_\_\_\_\_

Acknowledgements \_\_\_\_\_

Participate in a ceremony (attach details) \_\_\_\_\_

Provide closing remarks \_\_\_\_\_

Other (specify) \_\_\_\_\_

- more -

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**THE CHANCELLOR'S ROLE, cont.**

If speech is required, what is desired length? \_\_\_\_\_

Topic of speech \_\_\_\_\_

Talking points to address (attach) \_\_\_\_\_

Will there be other speakers? Describe. \_\_\_\_\_

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**OTHER DETAILS**

Who will greet the chancellor upon his arrival?

Name \_\_\_\_\_

Title \_\_\_\_\_

Day phone and cell phone \_\_\_\_\_

Designated or general parking?  
Attach directions to parking area. \_\_\_\_\_

Will a meal be provided?  
Indicate whether before, during or after program. \_\_\_\_\_

Where will the chancellor be seated?  
Indicate table, dais (platform), etc. \_\_\_\_\_

If at a table, who will be seated with the chancellor?  
Attach list if necessary. \_\_\_\_\_

From where will the chancellor speak?  
Indicate lectern, table, out in the open, etc. \_\_\_\_\_

Indicate if the following will be available:

Microphone (indicate type) \_\_\_\_\_

Equipment for PowerPoint presentation \_\_\_\_\_

Return the completed form and attachments to Shannon Trapp at [sdtrapp@ncat.edu](mailto:sdtrapp@ncat.edu).