

**NCBI Workshop Presentation Request Form**  
**Multicultural Research and Resource Center**  
Tel#: 703-993-4003 Fax#: 703-993-4117

**Today's Date:** \_\_\_\_\_ **Request Person:** \_\_\_\_\_

**Department/Office/Organization:** \_\_\_\_\_ **Account #:** \_\_\_\_\_

**Course Number (if applicable):** \_\_\_\_\_

**Class Instructor:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Best Time to be reached:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Proposed Presentation**

**Topic:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Starting Time:** \_\_\_\_\_ **Ending Time:** \_\_\_\_\_

**Length of the Presentation:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Description of the Participants (e.g., age range, interest, training level, etc.):**

\_\_\_\_\_

**Estimated Number of Participants:** \_\_\_\_\_

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**For MRRC Center Use Only**

**Request Received by:** \_\_\_\_\_ **on** \_\_\_\_\_

**Status (Please initial when a step is completed):**

**Excel Sheet:** \_\_\_\_\_

**Corporate Time Calendar:** \_\_\_\_\_

*(Front desk, NCBI, Dr. Webster, & Ms. Davis)*

**Confirmation E-mail Sent:** \_\_\_\_\_

**Folder in Drawer:** \_\_\_\_\_

**Copy in Workshop Book:** \_\_\_\_\_

**Booklets Ordered:** \_\_\_\_\_

**Facilitators scheduled:** \_\_\_\_\_

**Comments:**

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