

GUEST SPEAKER REQUEST FORM

Grossmont Adult Education

This form is to be used for all guest speakers. It should be filled out completely with special attention to “**Educational Objective(s)**” which should be consistent with the Course Outline for your subject.

Present this form to the Principal at least **TEN DAYS** before the scheduled guest speaker. Final plans for the speaker should not be made with the class until written approval has been obtained.

CLASS TITLE: _____

TEACHER: _____

SPEAKER’S NAME: _____

AGENCY: _____

DATE AND TIME SPEAKER IS SCHEDULED: _____

TOPIC: _____

EDUCATIONAL OBJECTIVE(S): _____

Other important information: _____

Date of request: _____
(Indicate date submitted)

Approved: _____
(Principal)