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| **Organising society:** |  |
| **Name of society representative:** |  |
| **Date of event (DD/MM/YYYY):**  **Start time of event (HH:MM):**  **End time of event (HH:MM):**  **Room:**  **Title and purpose of event:** | Click here to enter a date. |

# **External Speaker Information**

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| **Name**  **(*Please include all names that you may be known by)*** |  |
| **Date of birth:** |  |
| **Organisation:** |  |

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| Please provide the following details of the external speaker/s attending this event |

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| **Name**  **(*Please include all names that you may be known by)*** |  |
| **Date of birth:** |  |
| **Organisation:**  **Topics to be discussed:** |  |

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| Please answer the following questions |

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| Have tickets been issued? |
| Is there any known or likely media interest in the proposed event? |
| Where was the event advertised? (E.g. Internally / social media) |
| Is the event likely to have an impact on the University’s / Student Union’s reputation? |
| Is there any known or likely impact on the safety of students, staff or wider community attending the event? |
| Will there be external catering?  Yes  No |
| *(If you have said yes, you will need to see our procedures for governing visitors on campus)*  When completed this form will need to be authorised by:   1. *Students Union authorisation…………………………………………* 2. *Head of Security authorisation………………………………………...* 3. *Head of Catering (if applicable)………………………………………..* |