## SPECIAL CAPE

## U.S. OFFICE OF SPECIAL COUNSEL

1730 M Street, N.W., Suite 218 Washington, D.C. 20036-4505

## SPEAKER REQUEST FORM (NON-FEDERAL REQUESTER)

Please fill out the form below and fax it to Shirine Moazed, at 202-653-5161. Questions about completing this form should be directed to Shirine Moazed at 202-254-3600 or smoazed@osc.gov.

1.	General	Event	Information
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- a. Title and description of event:
- b. Event sponsor(s):
- c. Event dates:
- d. Event location:
- 2. Sponsor Contact Person for Proposed OSC Presentation:
  - a. Name:
  - b. Address:
  - c. Phone Number:
  - d. E-mail address:
- 3. Type and Topic of Presentation (<u>e.g.</u>, Prohibited Personnel Practices, Hatch Act, other):
- 4. Date, Time, and Location of Presentation:
- 5. Will payment of speaker's travel-related expenses be offered? (*Payment of such expenses is not required for consideration of this request.*) If <u>yes</u>, please complete the following:

Nature of Expense	If event sponsor	Payment to	Payment
( <u>e.g.</u> , plane ticket, hotel room, meals, rental	will not be source	OSC by check	amount
car, waiver of conference fee, other)	of payment, please	(C) or	
	identify source	in-kind (K)	

6.	If any payment in item 5 table will be from a source other than event sponsor, are you aware of any case(s) involving the <i>payment source</i> pending at OSC?  Yes ( ) No ( )  If <u>yes</u> , please indicate the status of the case(s), to your knowledge:
7.	Has event sponsor had any case involvement with OSC within the last five years? Yes ( ) No ( )
8.	Are you aware of any case(s) pending at OSC involving event sponsor?  Yes ( ) No ( )
	If <u>yes</u> , please indicate the status of the case(s), to your knowledge:
9.	How many people will be in attendance at the event?
10.	How many people do you expect to be in attendance at the OSC presentation?
11.	Will the OSC presentation be videotaped?  If yes, to whom will the videotape be broadcast?
12.	What type of merit system training has this audience received? Please be specific (and use additional paper if necessary):
13.	Is the audience primarily managers, first-line supervisors, personnelists/attorneys or nonsupervisory employees? Please indicate the representative occupations:
14.	Can you have the following available for the presentation?  Computer compatible w/ Microsoft Power-Point and projector?  Yes ( ) No ( )  Microphone? Yes ( ) No ( )  Podium or table? Yes ( ) No ( )
15.	Please briefly describe the layout of the room for the presentation:

Please indicate the name and address of person to whom the presenter can send handouts before the presentation:
If the OSC training is part of a larger training conference, please provide an agenda for the conference. If agenda is currently unavailable, please provide one as soon as possible.