NORTH CAROLINA AGRICULTURAL AND TECHNICAL STATE UNIVERSITY



Provost And Executive Vice Chancellor For Academic Affairs

Scheduling Request Form

INSTRUCTIONS

- PLEASE ALLOW THREE WEEKS FOR THE CONSIDERATION OF YOUR REQUEST.
- Complete this form in its entirety (two pages). An incomplete form may not be considered for scheduling.
- In addition to this form, please submit a draft program, draft remarks, and other relevant information related to this event **SEVEN DAYS** in advance.

The Provost's schedule is subject to change at <u>any</u> time due to university business and other responsibilities.

General Information	
Date of Request:	
Requester Name:	Entity Hosting Event:
Office Phone:	Email:
Cell Phone:	Website if applicable:
Address:	

The Provost's Role

Please select the most appropriate option, if you are requesting that she participate in multiple roles, please note theadditional requested role as the secondary role:

*Please note when there is a request for the Provost to speak in any capacity at your event, you must submit draft remarks in bullet form as a word document. The draft remarks should include any data/facts about your program or event, and any relevant historical information, points to emphasize, as well as any person/s to be recognized.

Primary Role

Select One

If you need the Provost to fill multiple roles at your event, please note the secondary role below.

Secondary Role

Select One

Event Information

Name of Event:

Event Date:

Event Start Time: Event End Time:

Time by Which the Provost Must Arrive:

Event Location (include inclement weather location also please):

Length of Time Required of the Provost:

Will Dignitaries Attend/Participate?

If yes, provide list and indicate their role at the event in the "additional details" area below.

Audience (include all possible):

Will there be other speakers? If yes, please list the other speakers here:

Brief Description of Event:

Will a short bio and/or head shot be required?

Additional Information

Day of event Point Of Contact Name and Phone Number:

Who will greet the Provost upon her arrival, if different than POC?

Designated parking area (Y/N): Parking Markers for the event:

Will there be a meal served? If yes, will it be before, during, or after the program?

Where will the Provost be seated? (Please indicate table, platform, etc.) If at a table, who will be seated with the Provost? (Attach a list if necessary)

Include any pertinent information or additional explanations here:

Print and/or save this completed form for your records. **Email** the required additional documents (draft progra m / run of show, remarks, fliers, etc.) to **both email addresses below**:

Camie S. Mack - csmack@ncat.edu

Devon Smith – dtsmith1@ncat.edu

Once completed, please click on the submit button below. Thank you!

SUBMIT

Updated June 2025