

# U.S. ARMY CYBER CENTER OF EXCELLENCE

## SPEAKER REQUEST

It's never too early to begin planning your event, and we want to be a part of that plan. Please complete the attached forms and send to the Protocol office at least 30 days before the event dates.

The information requested is required to evaluate the event appropriateness and compliance with Department of Defense policies and for coordination with the units involved. Please note that the Army's potential participation cannot be used in advertisements.

If your request is approved, then the group's POC must submit an agenda and RSVP list to our office 72 hours prior to the event. For events occurring off post, please provide complete and accurate directions to the event site and a map or line drawing.

**Please have the event POC review and sign the following:**

- I am acting on behalf of the sponsoring organization and certify that the information provided is complete and accurate to the best of my knowledge. I understand that a representative from the Protocol Office will contact me to discuss this request prior to any commitment.
- My signature certifies that I understand that requests are evaluated based on the needs of the U.S. Army. Completing this form does not confirm or guarantee approval or support. I also understand that there is always the possibility that operational commitments may preclude an approved request and a scheduled appearance may be cancelled on short notice due to the needs of the Army and mission requirements.

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Printed Name

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Signature

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Date

# U.S. ARMY CYBER CYBER CENTER OF EXCELLENCE

## SPEAKER REQUEST FORM

Title of Event:

Requesting Organization:

Organization's Website:

Date of Event:

Time of Event:

Speaker Arrival Time:

Time of Presentation:

Length of Presentation:

Requested topic:

Deadline to confirm Speaker:

Expected Attendance:

Dress Code for Event:

Address of Event:

Name or type of speaker requested and why (*Position, Subject Matter, etc.*):

### ADDITIONAL INFORMATION

Are the Speaker's bio and photo needed?

YES

NO

Will a reserved parking space be provided?

YES

NO

Gift?

YES

NO

Event being used to raise funds?

YES

NO

Media invited?

YES

NO

Presentation to be recorded?

YES

NO

Cost for the Event?

YES \$ \_\_\_\_\_

NO

Has a U.S. Army Cyber Center of Excellence Representative previously spoken at this Event?

YES (*Who and When*) \_\_\_\_\_

NO

Audio-Visual Equipment Available:

Lapel Microphone

Podium

Projector

Computer w/ Powerpoint Software

DVD Player

WIFI

Audience Composition:

Politicians

Veteran's Organization

Retired Military

Active Military

Industry Professionals (*Specify*) \_\_\_\_\_

Civic Organization (*Specify*) \_\_\_\_\_

Other \_\_\_\_\_

JROTC

Educators

Students

Background information about Event / Additional Details:

Event Agenda / Timeline:

## **POINT OF CONTACT**

Event Point of Contact:

Email Address:

Affiliation with Group:

Phone Number:

Cell Phone:

Today's Date:

Completed form must be submitted at least 30 days prior to the event date to the  
U.S. Army Cyber Center of Excellence's Protocol Office at:

**Email:** [usarmy.eisenhower.cyber-coe.mbx.protocol-office@army.mil](mailto:usarmy.eisenhower.cyber-coe.mbx.protocol-office@army.mil)