Project Presentation Services Request Form

*Request dates at least 2 weeks prior to presentation.
*Requests submitted with less notice may not be scheduled on the requested date or time.
*Presenters must supply, via e-mail, a project abstract when the presentation request form is submitted.

Presenter(s): ____________________________  Graduation Date: __________

Project Title: ____________________________

Advisor or Industry Supervisor: ____________________________  E-mail: __________
Advisor 2: ____________________________  E-mail: __________
Reader: ____________________________  E-mail: __________

Logistics of Your Presentation:

1st Choice: Requested Presentation Date: __________  Requested Presentation Time: __________
Requested Location (preferably an INI room or on-campus): ____________________________
*Please note that campus locations are not readily available during the academic year.

2nd Choice: Requested Presentation Date: __________  Requested Presentation Time: __________
Requested Location (preferably an INI room or on-campus): ____________________________
*Please note that campus locations are not readily available during the academic year.

About Your Presentation - Please Check All that Apply:
- I will have a PowerPoint presentation.
- I will have demos in my presentation.
- I will bring my own laptop.
- I will need to teleconference to ________________________________________.
  (Name of person; we have a teleconference bridge and will provide dial in instructions)
- I will need to videoconference to ________________________________________.
  (Name of person & location that has videoconference capability)
- I want my presentation to be videotaped (must submit consent form – available online).

INI will create a presentation announcement. In order to do so, we will need a copy of your abstract. Please e-mail an abstract of your project to the INI Enrollment Services Office at ini-enrollment@andrew.cmu.edu

If there are any individuals you wish to receive a notification, please list them below.

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<th>Email Address</th>
<th>Department</th>
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Submit your completed form and videotape consent form (if applicable) to the INI Enrollment Services Office:
1. Jamie Lehneke, Room 113, jlehneke@cmu.edu
2. Jessica Becker, Room 114, jbecker23@cmu.edu

Questions? Send an email to: ini-enrollment@andrew.cmu.edu

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