

Colloquium Speaker Information Sheet

DATE OF PRESENTATION		
PRESENTATION TITLE		
NAME OF SPEAKER (as shown on Social Security	v card)	
COMPLETE HOME ADDRESS		
PHONE	EMAIL	
COUNTRY OF CITIZENSHIP USA CITIZEN OTHER/COUNTRY* *If not US citizen, you must present valid passp	ort & visa/green card upon arriv	al
DATE OF ARRIVAL LODGING REQUIRED IF SO, FOR WHICH NIGHTS?		
SPEAKER WILL PURCHASE AIRFARE, OR		
DEPT PURCHASES THE FOLLOWING TIC	KET	
AIRLINE	FLIGHT #	_ DATE
AIRLINE	FLIGHT #	_ DATE
SPECIAL REQUESTS/NOTES		

OFFICE USE ONLY	SOCIAL SECURITY #	
	ESTIMATED COSTS	ACTUAL COSTS
Honorarium		
Claims Tax Exemption? Y N		
Lodging		
Airfare		
Taxi		
Parking		
Other		
Reception		
Lunch/Dinner		
TOTALS		

408 Smith Box 353550 Seattle, WA 98195-3550

Phone: 206.543.5843 fax 206.543.3313 email: geog@uw.edu