

Western Illinois University Mathematics Department
High School Presentation Request Form
(please duplicate and add pages as needed)

TEACHER NAME: _____

SCHOOL PHONE: _____ E-mail: _____

Preparation period (or best times to call): _____

SCHOOL: _____

ADDRESS: _____

Class #1: _____ Meeting time: _____

Preferred Presentation Title/Speaker: _____

Please add any helpful specifics (preferred dates, day of week, block schedule, etc.):

Class #2: _____ Meeting time: _____

Preferred Presentation Title/Speaker: _____

Please add any helpful specifics (preferred dates, day of week, block schedule, etc.):

Class #3: _____ Meeting time: _____

Preferred Presentation Title/Speaker: _____

Please add any helpful specifics (preferred dates, day of week, block schedule, etc.):

Class #4: _____ Meeting time: _____

Preferred Presentation Title/Speaker: _____

Please add any helpful specifics (preferred dates, day of week, block schedule, etc.):

Return to: Kim Hartweg
Department of Mathematics
Western Illinois University
1 University Circle
Macomb, IL 61455

Or email the appropriate information to: KK-Hartweg@wiu.edu
Or fax to Kim Hartweg at 309-298-1857