

# Request for International Student Speakers

International Cultural Service Program (ICSP), Western Oregon University

Group of students

Single student

Country/Countries of interest: \_\_\_\_\_

Name of organization: \_\_\_\_\_

Address: \_\_\_\_\_

Date(s) and time(s) for visit(s): \_\_\_\_\_

Name of contact person: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Work phone: \_\_\_\_\_

Home phone: \_\_\_\_\_ Best time to call: \_\_\_\_\_

Transportation provided?:  YES  NO (Please note that most students are not able to transport themselves)

Description of activity: \_\_\_\_\_

Expected number of participants/audience: \_\_\_\_\_

How many visits desired: \_\_\_\_\_

\_\_\_\_\_  
Name of contact person

\_\_\_\_\_  
Today's date

**Please return this form to:  
International Students and Scholars Affairs Office, Maaske Hall, Western  
Oregon University, Monmouth, OR 97361, or fax it to 503-838-8338.  
Please call 503-838-8425 or e-mail [global@wou.edu](mailto:global@wou.edu) for more information.**

## For office use only

Please sign your name if you will follow through on this request

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Copy in requested student's file

Copy in signed student's file

Copy in original request file

Added requestor address to database