

## Workshop Request Form

To request a workshop, please fill out this form. You can (1) drop of the form at The Wellness Center, Student Center East, 750 South Halsted, Room 238, (2) Fax it in at (312) 413-8438, or (3) e-mail it to [wellness@uic.edu](mailto:wellness@uic.edu)

**Please Note:**

- Please allow a **three week** notice when requesting a workshop.
- Due to safety concerns on and around campus, workshops can not be scheduled later than **6pm**.

**Today's Date:** \_\_\_\_\_

**Organization making request:** \_\_\_\_\_

**Contact person:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Phone: \_\_\_\_\_

**Date requested:** \_\_\_\_\_

**Workshop location:** \_\_\_\_\_

**Time requested** (including length of presentation): \_\_\_\_\_

**Topic:** \_\_\_\_\_

**Objectives:** \_\_\_\_\_  
\_\_\_\_\_

**Anticipated Attendance:** \_\_\_\_\_

**Audience Description:** \_\_\_\_\_  
\_\_\_\_\_

**How did you hear about us?** \_\_\_\_\_

**For office use:**

Trainer: \_\_\_\_\_ Observer: \_\_\_\_\_

Confirmed workshop date, time & place: \_\_\_\_\_  
\_\_\_\_\_

Confirmed with client by: \_\_\_\_\_ Date: \_\_\_\_\_

**Actual Attendance number:** \_\_\_\_\_

Materials Provided & Number: \_\_\_\_\_  
\_\_\_\_\_

Additional Notes: \_\_\_\_\_