**External Speaker Approval Form**

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| **Principal Organiser** (Name, Contact Email & Telephone Number) |  |
| Nature of Event |  |
| Names of Visiting speaker/s |  |
| Name of Organisation |  |
| Any known affiliations (particularly religious or political) |  |
| Expected Number of Attendees |  |
| Proposed Venue of Event |  |
| Proposed Date of Event |  |
| Estimated times of arrival/departure of visiting speaker/s |  |
| Type of Event   * Lecture * Debate * Training * Other – please specify |  |
| Audience Access:   * Invitation only * Ticket only * University only * Unrestricted/public |  |
| Any known previous controversy relating to the speaker/s |  |
| Web link fur further details on the speaker/s |  |
| Is this event and speaker/s likely to attract media interest? If so, why? |  |
| **Sign off by Head/Director Professional Services**  (Name & Date) |  |
| **(or) Sign off by President LiverpoolSU\***  (Name & Date) |  |
| **(or) Sign off by Faculty Head of Operations**  (Name & Date) |  |
| **Date sent to the Office of the Registrar** |  |
| **Approval/Refusal by Office of the Registrar**  (response from the Registrar) (date) |  |

**\*JMSU *Forms to be submitted to Head of Student Advice and Wellbeing and University Registrar.***

**By submitting this form, you consent to us contacting you further with regards to the information provided. We will not share your contact details with any third parties or contact you with regards to any other activities. If you require any further information as to how we will store your contact information, please write to** [**JMSUDPO@ljmu.ac.uk**](mailto:JMSUDPO@ljmu.ac.uk)**.**