



ILLINOIS ATTORNEY GENERAL HIGH TECH CRIMES IN-PERSON SPEAKER REQUEST FORM

Today's Date:	Date of Presentation: (agreed upon date)
Contact Name:	
Contact Phone:	Cell Phone: (for day of presentation)
Name of Organization:	
Address of Organization:	
City & State:	Zip Code:
County:	Email:

PRESENTATION DETAILS

TARGET AUDIENCE:	Students	Parents	Staff	Other (please specify)
Grade level(s):	Other:			
Preferred Digital Safety Emphasis (if any):	Cyberbullying	Inappropriate Sharing/ Sexting		
	Other (please specify): _____			
REASON FOR PRESENTATION:	Meet ISBE requirements	Additional education		
	Response to recent incident (please follow up with phone call to discuss)			
LENGTH OF PRESENTATION:	30 minutes	45 minutes	60-90 minutes (parents/staff only)	Other: _____
ESTIMATED SIZE OF AUDIENCE:	RSVPs requested for non-student events.			
PLEASE CHOOSE POTENTIAL DATES:	1)	2)	3)	
PREFERRED START TIME OF PRESENTATION:	AM		PM	
EQUIPMENT AVAILABLE:	Projector/screen	Audio System	Internet Access	Other (please specify)
WILL THIS PRESENTATION BE OPEN TO THE MEDIA?	Yes	No	_____	

PLEASE SEND COMPLETED FORM TO:	<i>Northern Illinois</i>	<i>Central and Southern Illinois</i>
	Karilyn Orr Karilyn.Orr@ilag.gov (773) 590-7860	Alyssa Castleman Alyssa.Castleman@ilag.gov (217) 685-7603