



## REQUEST FOR LEADERSHIP SERVICES

**Instructions:**

Complete and send/e-mail directly to the First District Vice President of Leadership Services - [leadership@pta1.org](mailto:leadership@pta1.org) and the President - [president@pta1.org](mailto:president@pta1.org) for approval.

**Council President** \_\_\_\_\_ **Council PTA** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Cell** \_\_\_\_\_ **Email** \_\_\_\_\_

District Officer(s)/Chairman Requested	Field Service Topic Requested	Time Allotted	Handouts Needed	Date Confirmed w/participant

**Services Requested** (check all that apply)

- Workshop     
  Board Training     
  Council/Unit Assistance     
  Guest Speaker

**Meeting Information**

Date: \_\_\_\_\_ Time to start: \_\_\_\_\_ To end: \_\_\_\_\_

Name of meeting venue: \_\_\_\_\_ Room: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Program Topic: \_\_\_\_\_ Anticipated number in attendance: \_\_\_\_\_

**Audience will be composed of representation from:**

- Units       Council       Teachers       Administrators  
 Students       Community       Other: \_\_\_\_\_

**The event will be publicized by:**

- Fliers       Council/Unit Newsletters       E-mail Blasts       Website

**The room will be equipped with the following:**

- Table with microphone       Podium with microphone       Floor microphone  
 LCD projector       Computer       Screen

Field Service Approved \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
First District Vice President of Leadership