Graduate Colloquium Proposal Form

Speaker information

Name: _________________________________________________________________

Address: ____________________________________________________________

City: _________________________ State: __________ Zip code: ________

Sponsoring Department

Department: __________________________________________________________

Sponsoring applicant: _________________________________________________
(Graduate student or graduate faculty working with their graduate student)

Phone: ___________________ E-mail: ________________________________

Lecture date: Click here to enter a date. Time: _______________________

Location: ____________________________

Title: ____________________________________________________________

Seminar date: Click here to enter a date. Time: _______________________

Location: ____________________________

Title: ____________________________________________________________
Justification of lecture topic: (Please provide a paragraph with a complete description of the topic. Ex: How this topic relates to graduate-level students. Are there graduate classes being offered on a similar topic next year? Are there Ph.D. students who are working in this topic? How do the speaker’s research interests correspond with your graduate student’s interest?)

Justification of seminar topic: (Please provide a paragraph with a complete description of the topic. Ex: How this topic relates to graduate-level students. Are there graduate classes being offered on a similar topic next year? Are there Ph.D. students who are working in this topic? How do the speaker’s research interests correspond with your graduate student’s interests?)
Role of graduate students in speaker selection. Proposals omitting this information will not be funded. The process should involve a systematic, relatively formal department-wide process in which students should be involved in the initial generation of potential speakers and have a major role in the final voting/selection of the speaker. (Please provide a paragraph explaining the graduate student decision-making process). For example, please state if a student committee met to generate a list of potential speakers, if all graduate students in your program were given the chance to vote on their preferred speaker, or if other procedures were used to make the selection.
Qualification of the speaker

Summary C.V. or scholarly-directory information must be attached (you may copy/paste C.V. here or add C.V. at the proposal form)

**NO MORE THAN TWO PAGES**

*You can copy/paste here or add at the end of the proposal.*

Budget

If total payment to speaker is $400 or less, do not itemize. Over $400 **MUST** provide an estimated itemized budget. *(Double click the table, and then click in the area to place your numbers).*

**PLEASE DO NOT REMOVE ANY ITEMS ON THE TABLE. IF YOU HAVE NOTHING TO PLACE IN THE SECTION LEAVE IT BLANK.**

### Travel (as appropriate)

<table>
<thead>
<tr>
<th>Description</th>
<th>Number</th>
<th>Amount</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Airfare average 2 week advanced purchase coach fare</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transportation for departing airport limo</td>
<td></td>
<td>$115.00</td>
<td>$</td>
</tr>
<tr>
<td>Transportation for arrival airport limo</td>
<td></td>
<td>$115.00</td>
<td>$</td>
</tr>
<tr>
<td>Rental car (rent, gas/tolls)</td>
<td></td>
<td>$0.580 per mile</td>
<td>$</td>
</tr>
<tr>
<td>Hotel HSC</td>
<td></td>
<td>$89 per night</td>
<td>$</td>
</tr>
<tr>
<td>Meal per diem</td>
<td></td>
<td>$28 per day</td>
<td>$</td>
</tr>
<tr>
<td>Speaker fee</td>
<td></td>
<td>$</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>$</td>
<td></td>
</tr>
</tbody>
</table>

Multiple sponsoring units must indicate proportion to be allocated to each unit.

Academic Unit: ___________________________________ Amount: $__________________

Expenditures are to cover: ______________________________________________________

Academic Unit: ___________________________________ Amount: $__________________

Expenditures are to cover: ______________________________________________________

Academic Unit: ___________________________________ Amount: $__________________

Expenditures are to cover: ______________________________________________________
TOTAL BUDGET REQUEST TO COLLOQUIUM COMMITTEE: $__________________

Sponsoring applicant’s signature: ________________________________________________

 Approval of chair or program or center director: ___________________________________

If Colloquium funds are being requested by more than one academic unit, heads for ALL units must sign the proposal as authorization for the distribution of the funds.

Academic unit: ________________________ Signature: ______________________________

Academic unit: ________________________ Signature: ______________________________

Academic unit: ________________________ Signature: ______________________________

Do you wish to have us prepare 25 free posters? ____ YES  ____ NO

***Remember to
    Attach a C.V.
    Have signatures of Department Chair/Director/Center Director

Completed and signed proposals are to be sent electronically by the due date to

Debbie Williams
Graduate Colloquium Office
Adams Hall, Room 219
Northern Illinois University
Office- 815-753-0425
Fax- 815-753-6366
dwilliams16@niu.edu or gscolloq@wpo.cso.niu.edu

**Departments must notify the Colloquium office if a speaker has cancelled their visit to NIU within 24 hours of the schedule talk.**