

MUSEUM LECTURE PROPOSAL

Name:	Department:
Email:	Phone:
Is this part of a course Y N If yes, Course Number: _____	
Students Only: Is this part of a course or thesis requirement Y N If yes, Course Number: _____	
Semester/Year _____ Major Professor: _____	
Major Topics & Themes: Relevant Exhibitions or Collections (please list all known connections):	
Title of Lecture: Short Description: (50-150 words)	
Proposed Dates & Times: _____	
A/V Needs (please circle all that apply): LCD projector Laptop DVD VHS Other: _____	