

FITCHBURG STATE UNIVERSITY POLICE DEPARTMENT



32 Clinton Street Fitchburg Ma 01420*Business line 978-665-3111* Fax 978-665-4599

Presentation/ Demonstration Request Form

-	Person requesting presentation / demonstration ity Police use. Use back of paper if more room is needed)
Topic of presentation/demonstration:	
Any Specific Areas of Concentration?:	
Date of presentation://_	Starting Time: Ending Time:
Location of Presentation:	Room #
Name of Organization, Club, Group if applicable:	
Any Special Preferences (Specific Officer*, audio	o/visual aids, lecture vs interactive, etc.):
*We will attempt to schedule the presenter/officer you request; h	nowever, this may not always be possible. If you feel strongly about having a particular
officer/presenter	r for your event, please explain above.
<i>y</i>	r for your event, please explain above.
Your Name:	
Your Name:	r for your event, please explain above. Phone # :() Email:
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Your Name:Address/ Office Location:	ty Police Response to Requesting Peron
Your Name: Address/ Office Location: Fitchburg State Universi If you need to speak with this person s/he may be	ty Police Response to Requesting Peron has been assigned to do your presentation/ demonstration.