

# Carnegie Mellon University

## Information Networking Institute

### Project Presentation Services Request Form

**\*Request dates at least 2 weeks prior to presentation.**

**\*Requests submitted with less notice may not be scheduled on the requested date or time.**

**\*Presenters must supply, via e-mail, a project abstract when the presentation request form is submitted.**

Presenter(s): \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Project Title: \_\_\_\_\_

Advisor or Industry Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Advisor 2: \_\_\_\_\_ E-mail: \_\_\_\_\_

Reader: \_\_\_\_\_ E-mail: \_\_\_\_\_

#### Logistics of Your Presentation:

**1<sup>st</sup> Choice:** Requested Presentation Date: \_\_\_\_\_ Requested Presentation Time: \_\_\_\_\_

Requested Location (preferably an INI room or on-campus): \_\_\_\_\_

*\*Please note that campus locations are not readily available during the academic year.*

**2<sup>nd</sup> Choice:** Requested Presentation Date: \_\_\_\_\_ Requested Presentation Time: \_\_\_\_\_

Requested Location (preferably an INI room or on-campus): \_\_\_\_\_

*\*Please note that campus locations are not readily available during the academic year.*

#### About Your Presentation - Please Check All that Apply:

- I will have a PowerPoint presentation.
- I will have demos in my presentation.
- I will bring my own laptop.
- I will need to teleconference to \_\_\_\_\_  
(Name of person; we have a teleconference bridge and will provide dial in instructions)
- I will need to videoconference to \_\_\_\_\_  
(Name of person & location that has videoconference capability)
- I want my presentation to be taped (**must submit consent form** – available online).

INI will create a presentation announcement. In order to do so, we will need a copy of your abstract. Please e-mail an abstract of your project to the INI AAO at [ini-enrollment@andrew.cmu.edu](mailto:ini-enrollment@andrew.cmu.edu)

If there are any individuals you wish to receive a notification, please list them below.

_____	_____	_____
Name	Email Address	Department

_____	_____	_____
Name	Email Address	Department

Submit your completed form to the INI AAO:

1. Asia Donegan, [asloyd@andrew.cmu.edu](mailto:asloyd@andrew.cmu.edu)
2. Jessica Becker, [jbecker23@cmu.edu](mailto:jbecker23@cmu.edu)

Questions? Send an email to: [ini-enrollment@andrew.cmu.edu](mailto:ini-enrollment@andrew.cmu.edu)