**FREEDOM OF SPEECH ON CAMPUS**

**GUEST SPEAKER REQUEST FORM**

This form must be completed by the person proposing the request. This form must be completed in accordance with **The Code of Practice Related to Freedom of Speech and Meetings on University Premises (including the premises of Bolton Students’ Union)** of which can be found at <https://www.bolton.ac.uk/assets/Uploads/Code-of-Practice-Relating-to-Freedom-of-Speech-and-Meetings-on-University-Premises-2021-22.pdf>. Events held at the Chaplaincy must approved and signed off by the Chaplaincy of the University so please complete the **Invitation for Guest External Speaker / Group Leader to a meeting / event held in the Chaplaincy** form which is available from the Students’ Union. For all other guest speakers, these must be approved and signed off by the General Manager of Bolton Students’ Union, please complete the form below. Guest Speaker forms must be handed in minimum 4 weeks prior to your event.

**Society Details**

|  |
| --- |
| **Name of Society: ..…………………………………………………………………………………………………….****Full name: ……………………………………………………………………………………………………………….****Student ID: ..……………………………………………………………………………………………………………..****Contact telephone number: ………………………………………………………………………………………...** |

**SECTION ONE – Please complete first and return to the SU before a provisional invite is sent to the guest speaker**

|  |
| --- |
| **Name, address and occupation of speaker: ………………………………………………………………………………………………………………………...….…………………………………………………………………………………………………………………………....…………………………………………………………………………………………………………………………….****Name of previous venue(s) used by speaker: ……………………………………………………………………………………………………………………...……..………………………………………………………………………………………………………………………...…..****Has the speaker spoken at the University, or another University, before? If yes, where and when?****……………………………………………………………………………………………………………..……….……..****Proposed Topic: ..………………………………………………………………………………………………………** |

Student Signature: ………………………………………. Date: ………………………………..

**For Office Use Only**

Date Section One received by the Students’ Union: ..……………………………………………………………

Pre-Approved?: Yes No Signed: …………………………………… Date: ..………………………

**SECTION TWO – Only when section one has been completed and approved by Societies and Events Coordinator should you complete Section Two**

|  |
| --- |
| **Details of meeting or event: Date……………………………………. Time:……………****Speaker’s time of arrival: ……………………………………………...****Speaker’s time of departure: …………………………………………****Title and brief synopsis of topic: …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………****What are the proposed charges of the speaker, if any? ..........................................................................................................................................................................****What language will the speaker be using if not English? …......................................................................................................................................................................****Proposed venue of meeting:****……………………………………………………………………………………………………………………………..****Please indicate whether the speaker has accepted the provisional invitation:** **(Circle or delete as appropriate) – Yes, Conditionally** **– Yes, Unconditionally**  **– No** **Is there anything else you think we need to be aware of?****……………………………………………………………………………………………………………………………..** |

Student Signature: ……………………………………………………………………… Date:...…………………….

**For Officer Use Only**

Date Section Two received by the Students’ Union: ……………………………

Approval?: Yes No Signed: ………………………………… Date:………………………

**Final Approval/Rejection will be given within 5 working days of the Students Union receiving details of the Guest Speaker.**