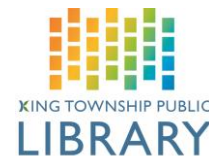


King Township Public Library



LIBRARY BOARD DEPUTATION/PRESENTATION REQUEST FORM

The deputation/presentation request form and any written submission and background information for consideration by the King Township Public Library Board for scheduled meetings must be submitted to the CEO by 4:30 p.m. one week prior to the meeting. The Board and the CEO reserve the right to refuse or defer any deputation at any time. The Board may not be required to answer any questions in regards to the deputation as it is strictly for information purposes only and not intended for discussion. If discussion is required, it is the discretion of the Board as to when that discussion will occur.

PLEASE PRINT

I am requesting deputation to speak:

on my own behalf – your name: _____

on behalf of a group/organization/association – please state name of group/organization/association: _____

Subject of Presentation

Please describe below, the subject matter of the requested oral submission in sufficient detail so as to provide the Board with a means to determine its content and to assess its relative priority to other requests for oral submission. Weight will be given to those requests that provide more detailed descriptions of the content of the presentation, particularly defining how the subject matter aligns with the Library's Strategic Plan or Policies. Please note, if you intend to include handouts or a presentation using electronic devices, one (1) copy of an electronic presentation and twelve (12) hard copies of the presentation including any handouts are to be delivered to the CEO ***no later than noon on the Thursday prior to the meeting in which you are approved to present.***

Reason why this presentation is important to the Board and the library:

Scheduling Request: Please state your preferred presentation date and time required. Deputations are permitted at regular Board meetings, are scheduled on the third Tuesday each month, except July and August.

Date: _____ Time required (maximum – 5 minutes): _____

Date of Request: _____

Signature of Speaker(s): _____

Address: _____

Telephone: _____ Fax: _____

E-mail: _____