

Guest Lecturer Request Form

**NORTHERN
ARIZONA
UNIVERSITY** 

College of Social and
Behavioral Sciences

Guest Name:

Phone:

Address:

Contact Email:

Dates for Visit:

Classes or Event Participating In:

Faculty Requester:

Will Guest receive a fee? Yes No

Amount of Fee:

Will Guest be reimbursed for travel? Yes No

Estimated Travel Costs:

Flight

Mileage (attach mapquest) ___ miles *

Rental Vehicle

Shuttle

Meals & Incidentals

Lodging

Other

TOTAL ESTIMATE

Director/Chair signature (or attach email approval) _____

Speedchart (funding source) _____

Please notify the Guest Lecturer that they will be contacted via email by the SBS Financial Services Team to register them as a vendor if they are receiving a fee. All receipts must be submitted for reimbursement to SBSServices@nau.edu.

Submit form and approvals to SBSPurchasing@nau.edu. Submit receipts upon completion of guest visit.