

Peach County High School Request for Guest Speaker

Teacher _____ Course _____

Name of Guest Speaker _____

Organization Associated With _____

Date of Presentation _____ Location _____ No. of Students _____

How does the Guest Speaker's presentation fit into your daily lesson plans?

What skills will this presentation reinforce?

Teacher's Signature _____ Date _____

Date Received by Principal _____

Principal's Interview Is Required

Approved

Not Approved

Principal's Signature

Date