

Presentation Request Form

Please return to Career Services, Brighton Campus, Building 3, Room 108, upon completion. Requests will be confirmed/denied within one week of the date of the request. At least three weeks advance notice is recommended. Name: Date: _____ Department/Club/Organization: Ofc. Phone: _____ Dept. Phone: _____ Home Pone (if appropriate): _____ Email: _____ **Topic(s) Requested (Please Check) Career Services Overview** Interviewing skills: How to Make the Best Impression Career Exploration/Careers in ? Handshake: How to Activate and Linked In: Networking for Success Create Your Unique Profile Mock Interviews: Let's Get it Right

Resumes: Preparing an Effective

Resume & Cover Letter

Job Search Strategies: How to Find

the Job You Want

Note: For COS courses, we recommend the Career Services Overview presentation. We can also customize a presentation for your particular needs. For more information, email MCC's Career Services@monroecc.edu).

Class Title & Sec	ction or Organization:	CRN#							
Characteristics (e.g. major, first year):									
Presentation loca	ation:	Approximate number of students:							
Length of time allotted: Technology-equipped classroom (if applicable): Yes No List two (2) dates and times in order of preference:									
Choice	Day	Date 1	ime -						
1 st Choice									
2 nd Choice									

Additional Comments:

Presentation Request Confirmation (For Office Use Only)									
Date Processed:	Workshop Presenter:								
Scheduled Date:		Start Time:		End Time:		<u> </u>			
Request Status:	Confirmed	Regrets	Contact Method:	Phone	Email	In Writing			
Initials:	Date Initialed:								