



# Presentation Planning Sheet

**Organization** \_\_\_\_\_

**Contact Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Email** \_\_\_\_\_ **2<sup>nd</sup> Phone** \_\_\_\_\_

**Address** \_\_\_\_\_

**City, State, Zip Code** \_\_\_\_\_ **Parish** \_\_\_\_\_

**Directions** \_\_\_\_\_

## Type of Presentation

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Pre-K / Head Start    | <input type="checkbox"/> K-8 Students         | <input type="checkbox"/> General High School                     |
| <input type="checkbox"/> All Drivers Education | <input type="checkbox"/> School Bus Drivers   | <input type="checkbox"/> Professional Drivers – Truckers         |
| <input type="checkbox"/> Law Enforcement       | <input type="checkbox"/> General Firefighters | <input type="checkbox"/> Professional Drivers – Commercial Buses |
| <input type="checkbox"/> Misc. General Adult   |   |  |

**Presentation Day/Date** \_\_\_\_\_

**Presentation Time(s)** \_\_\_\_\_ (Allow 10-15 minutes between presentations)

*Recommended Times for Schools: K-Grade 1 (20 min), Grades 2-3 (30 min), Grades 4-8 (45 min), Grades 9-12 (class period)*

**Number Attending** \_\_\_\_\_

**Interpreter Needed?**  Hearing Impaired  Visually Impaired  Foreign Language

**Seating Arrangements**  Auditorium  Classroom  Library  
 Conference Room  Cafeteria  Gymnasium  Restaurant  
 Other \_\_\_\_\_

## AudioVisual Materials (P=Provided, NP=Not Provided)

Computer  PowerPoint Projector  VCR/DVD Player  TV Monitor  
 Screen  Podium  Microphone  Extension Cord/Surge Protector

**Presentation Materials**  Charts/Bag  Easel  
 PowerPoint Visuals  Flash Drive (USB drive)  Laser Pointer

**Video(s)** \_\_\_\_\_

**Brochure(s)** \_\_\_\_\_

## Giveaways

Coloring Book  Key Ring  Bookmark Ruler  Ruler  
 Activity Book  Pencil  Ink Pen  Litter/Drawstring Bag  
 Lapel Pin  Other \_\_\_\_\_