

**U.S. Central Command Participation Request Supplemental Information Form**

Please fill out and return this form along with the DD2536 and a draft program agenda to [centcom.macdill.centcom-hq.mbx.community-relations@mail.mil](mailto:centcom.macdill.centcom-hq.mbx.community-relations@mail.mil). All required fields marked in red must contain information for the request to be considered complete. Please allow up to one week for a response.

**1. GENERAL INFORMATION**

**CRITERIA FOR DOD PARTICIPANT REQUESTED:**

**IF REQUESTING A SPECIFIC INDIVIDUAL AND THE INDIVIDUAL IS UNAVAILABLE, WILL DEFERRAL BE ACCEPTABLE? IF YES, DO YOU HAVE PREFERENCE?**

**IF REQUESTING A SPEAKER, PLEASE LIST ADDITIONAL SPEAKERS INVITED AND/OR CONFIRMED FOR EVENT:**

**ARE SPOUSES OR GUESTS INVITED?**

**EVENT DRESS REQUIREMENT:**

**DESCRIBE THE PURPOSE OF THE EVENT:**

**2. PRESENTATION INFORMATION (IF NOT A REQUEST FOR SPEAKER, SKIP TO SECTION 3.)**

**REQUESTED TOPIC (PLEASE BE SPECIFIC):**

**STYLE (KEYNOTE, PANEL, PRESENTATION):**

**LENGTH OF PRESENTATION:**

**WILL THERE BE A QUESTION AND ANSWER SESSION?**

**NAME OF Q&A MODERATOR:**

**LENGTH OF Q&A SESSION:**

**PODIUM MIC OR WIRELESS MIC?**

**TECHNOLOGY AVAILABLE TO SHOW VIDEO AND/OR PRESENTATION?**

**NAMES OF SPEAKERS WHO HAVE CONFIRMED TO PARTICIPATE:**

**NOTABLE SPEAKERS WHO PARTICIPATED IN THE PAST:**

**3. AUDIENCE OR ATTENDEE INFORMATION**

**IS THE EVENT OPEN TO THE PUBLIC OR INVITATION ONLY?**

**NUMBER OF ATTENDEES ANTICIPATED:**

**DESCRIBE COMPOSITION OF THOSE WHO WILL BE IN ATTENDANCE (TYPES OF ORGS REPRESENTED - GOVT, POLITICAL, EDUCATION, INDUSTRY, ETC.):**

**NOTABLE INDIVIDUALS WHO HAVE CONFIRMED TO ATTEND:**

**4. MEDIA INFO, PRINT PRODUCTS AND SOCIAL MEDIA**

**CAN CENTCOM PROVIDE A PUBLIC AFFAIRS PHOTOGRAPHER TO CAPTURE THE EVENT?**

**MEDIA POC IF DIFFERENT THAN THE EVENT POC:**

**WILL THERE BE A TEXT TRANSCRIPT AVAILABLE COVERING THE SPEECHES/ENGAGEMENT?**

**WILL THERE BE ANY MEMBERS OF THE MEDIA IN ATTENDANCE?**

**PLEASE PROVIDE CONFIRMED MEDIA ORGANIZATIONS AND REPORTER NAMES:**

**WILL REMARKS BE ON-THE-RECORD OR OFF-THE-RECORD?**

**SOCIAL MEDIA POC IF DIFFERENT THAN THE EVENT POC:**

**WILL MARKETING FOR THE EVENT BE DONE PRIOR TO THE EVENT? (IF SO, PROVIDE WEB ADDRESSES, HANDLES, ETC.):**

**WILL THE EVENT BE RECORDED?**

**HOW WILL THE RECORDING BE USED? (NOTE IF THERE WILL BE A COST REQUIRED TO ACCESS THE RECORDING):**

**WILL THE PHOTOS/VIDEO BE POSTED IN A PUBLIC PLACE OR DISTRIBUTED AFTER THE EVENT CONCLUDES?**

**IF SO, WHERE/HOW?**

**WILL THE EVENT BE LIVE-STREAMED?**

**IF SO, WHERE WILL EVENT BE SHOWN?**

**5. LOGISTICS, ASSOCIATED COSTS AND MISC INFO**

**NOTE THE COST FOR DOD MEMBER TO PARTICIPATE:**

**NOTE THE COST FOR ATTENDEES OTHER THAN DOD PARTICIPANT:**

**COST OF MEAL PROVIDED TO DOD PARTICIPANT (IF ANY):**

**IF BEYOND A 60 MILE RADIUS FROM CENTCOM HEADQUARTERS, IS THE ORGANIZATION ABLE TO PROVIDE TRAVEL ASSISTANCE? (NOTE EXACTLY WHAT KIND AND THE BUDGETED COST.)**

**DOES THE ORGANIZATION HAVE MATTERS OR BUSINESS OUTSTANDING WITH U.S. CENTRAL COMMAND?**

**IF YES, PLEASE DESCRIBE:**

**Terms & Conditions: By submitting this form on behalf of yourself or your sponsoring organization you certify that the information provided above is complete and accurate to the best of your knowledge. You understand that representatives from USCENTCOM will contact you to discuss arrangements and costs involved prior to final commitments, or to inform you of an inability to support this event. You also understand that operational commitments must take priority and can preclude a scheduled appearance at an approved public activity.**