



EVENT DOCUMENTATION

SECTION ONE: ATTENDANCE

This section is to be completed by the visiting scientist in consultation with the event host.

Speaking of Science is a National Science Foundation (NSF) funded program through the Louisiana EPSCoR program at the Louisiana Board of Regents for Higher Education (BoR). The NSF and the BoR are committed to providing equal opportunities for participation in its programs and promoting the full use of the nation's research resources. To aid in meeting these objectives, the NSF collects information on the gender, race, ethnicity, and disability status of individuals participating or served by NSF-sponsored activities.

The Board of Regents must periodically report its progress in this area, including the Speaking of Science (SoS) program. Please help us collect this data by providing information regarding the SoS presentation audience.

Instructions:

Complete the table below to account for all K-12 participants served in a single visit/day. Enter the number of participants by sex and race/ethnicity in the space provided below. Total each row (male and female) in the column marked Total by Sex. Total each column (race/ethnicity) in the row marked Total by Race/Ethnicity. Lastly, account for participants with disabilities and adults.

Sex	American Indian or Alaska Native	Asian	Black or African American	Hispanic or Latino	Native Hawaiian or Pacific Islander	White, Not Hispanic or Latino	Total by Sex
Male							
Female							
Total by Race/Ethnicity							

___ hearing impaired ___ visually impaired ___ mobility/orthopedically impaired ___ other impairment ___ adults

SECTION TWO: VERIFICATION

This section is to be completed by the event host. Find a presentation evaluation at <https://tinyurl.com/y5bkv527>.

I hereby certify that _____ provided a Speaking of Science program presentation(s)
(scientist name)

on _____, _____, 20____ to _____ entitled
(date of event) (name of school or community organization)

(title(s) of program presentation, list all by title)

first & last name (print) _____
title _____
signature _____
date

