

CAREER DAY PRESENTATION REQUEST

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Name:	Name:		Date:	
School Name:				
School Street Address:				
School City:		State:	Zip:	
County:				
Daytime Telephone:				
E-mail Address:				
Information About Event				
Date:	Start Time:	End Time:		
Presenter ro	otates to multiple classrooms tate, presenter stays in one class se Explain: Inters Requested: Ins Per Presenter:	Presenters will have access to: Computer Projector Smartboard Tables and Outlets	Grade Level: K-2 3-5 6-8 9-12	
Brandy Incorvia Administrator of Educational Programs Santee Cooper 305-A Gardner Lacy Road Myrtle Beach, SC 29579 Fax: 843-347-8781 Phone: (843) 347-3399 Ext. 3030 Email: brandy.incorvia@santeecooper.com				
This section	n will be completed by Sante	ee Cooper and returned to you as c	onfirmation.	
iNote Required:	School Contacted:	Volunteers Confirmed:	Materials Mailed:	

Volunteers: