



New Jersey Department of Health COMMISSIONER EVENT ATTENDANCE REQUEST

Commissioner welcomes your invitation at any time, however, we appreciate 8 weeks notice prior to an event. Once we receive your request, it will be acknowledged by a return email and processed at the appropriate time. We typically do not confirm events more than 3 - 4 weeks in advance.

If you plan on using promotional materials with the Commissioner's name, please obtain approval by copying Rachel Hammond, DOH Ethics Liaison at Rachel.Hammond@doh.state.nj.us for Ethics Review prior to public release.

Please email the completed form to: feedback@doh.state.nj.us.

Title of Event		Organization Sponsoring Event	
		Date of Event	Is Date Flexible? <input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Event <input type="checkbox"/> Meeting <input type="checkbox"/> Speaking Engagement <input type="checkbox"/> Event Appearance <input type="checkbox"/> Tour <input type="checkbox"/> Press Conference <input type="checkbox"/> Ribbon Cutting <input type="checkbox"/> Fundraiser <input type="checkbox"/> Other (specify) : _____		Event Location and Address	
Describe the program, including timeline and speaking order or attach agenda.			
Is event open to Press? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Any associated expenses such as Registration, Travel or Meals? <input type="checkbox"/> Yes <input type="checkbox"/> No		Can venue accommodate Powerpoint presentations? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Requested Speaking Time/Length?		Are any Elected Officials invited or attending? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Who are audience, participants and expected number of attendees?		Who are other invited speakers?	
Contact Person	Title	Cell or Office Email	
Additional Notes/Comments			