



**MaCIE Lecture Series
Request to Host a Lecturer Form**

APPLICATION

Name of the Institution: _____

Address: _____

Phone: _____ Fax: _____

Yes, we are interested in hosting a MaCIE Lecturer during the following semesters:

___ Spring, 2010

___ Fall, 2010

___ We would like more information about the lecturers and selected topics.

Please fill out and send or fax this form to:

Clare M. O'Brien, PhD

Director of International Education

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Fitchburg, MA 01420

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