**College of Arts and Communication Visiting Artist/Speaker Program**

**Visiting Artist/Speaker Agreement**

**Visiting Artist:**

**Sponsor:**

|  |  |
| --- | --- |
| Dates/Times/Place of Lectures/Performances | Payment Amount |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |

Final Amount of Travel $

Final Amount of Per Diem $

Other – Explain $

Total Amount Paid to Visiting Artist/Speaker $

Signature of Visiting Artist/Speaker Date:

(electronic signature accepted)

Signature of Sponsor Date: