National Institutes of Health
Turning Discovery Into Health

NIH Events MANAGEMENT

NIH Events Management Branch
Multimedia Work Order Request

- Full Event Title:
- Date(s):
- Location: Virtual ☐ On-Site ☐ Bldg./Room: Hybrid ☐
- Time(s):
- Test Date(s):
- Test Times(s):
- Tech Support:
- Tech Support Phone Number:
- Institute:
- IC Branch:
- AO Name:
- AO Phone Number:
- CAN Number:

Additional Services

- Will you need ASL services? Yes ☐ No ☐
- Do you need us to create prerecorded talks for your event? Yes ☐ No ☐
- Will you have Pre-records for play back? Yes ☐ No ☐
- Do you need Dual Captioning for your event? Yes ☐ No ☐

We will create a work order number for you to use to book your meeting with CIT.

We will also need your confirmation information from the Web Team such as SIP address:

Passcode:

"Join the Meeting" URL:

Submit Form **Reset Form** **Cancellation Policy**

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MM WO#: Producer: