CENTER FOR CENTERS

Event/Project Support

Top of Form

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Department/Group Name: | | | | | |  | | | | | | | | | | |
| Contact Name: | | |  | | | | | | | | | | | | | |
| E-mail: |  | | | | | | | | | | Phone: | | |  | | |
| Title of Event: | | |  | | | | | | | | | | | | | |
| Event Description (for calendar posting): | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| Event Date(s): | | |  | | | | | | | Event Time(s): | | | |  | | |
| Expected Attendance: | | | | |  | | | | | | | | | | | |
| Event Management Support Needs: | | | | | | | | | | | | | | | | |
|  | | Lecture Room Booking | | | | | | |  | | | Speaker Travel/Hotel | | | | |
|  | | Catering | | | | | | |  | | | Audio Visual/ Photography/ Video | | | | |
|  | | Other: | | |  | | | | | | | | | | | |
| Web or Communications Support Needs: | | | | | | | | | | | | | | | | |
|  | | Flyer Design, Production, and Posting | | | | | | |  | | | Calendar and Publication Postings | | | | |
|  | | Poster Design, Production, and Posting | | | | | | |  | | | Conference/Project Web Page | | | | |
|  | | Other: | | |  | | | | | | | | | | | |
| ILA Support Amount: | | | | | $ | | | | | | | | | | | |
| Other Funding Sources (if applicable): | | | | | | | | | | | | | | | | |
| Funding Source 1: | | | |  | | | | | | | Amount: | | | $ | | |
| Funding Source 2: | | | |  | | | | | | | Amount: | | | $ | | |
| Funding Source 3: | | | |  | | | | | | | Amount: | | | $ | | |
|  | | | | | | | | | | | | | | | | |
| Chart String (internal use only): | | | | | | | | | | | | | | | | |
| Dept. | | | Fund | | | | Fund Source | Program | | | | | Function | | | Account |
|  | | |  | | | |  |  | | | | |  | | |  |
|  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| Submitted by: | | |  | | | | | | | | | | Date: | |  | |
| *Submit a minimum of 30 days prior to each event.* | | | | | | | | | | | | | | | | |

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