



**Process must begin at least four weeks prior to event.**

Sponsoring Club/Organization: \_\_\_\_\_

Student Legal Name: \_\_\_\_\_

Email Address: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Event Name: \_\_\_\_\_ Location: \_\_\_\_\_

Proposed Date: \_\_\_\_\_ Proposed Start Time: \_\_\_\_\_ Proposed End Time: \_\_\_\_\_

Detailed Description of Event: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Expected Attendance: \_\_\_\_\_ Estimated Cost: \$ \_\_\_\_\_ Budget No.: \_\_\_\_\_

\_\_\_\_\_  
Club Officer Signature

\_\_\_\_\_  
Date: MM/DD/YY

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Date: MM/DD/YY

**Tentative Approval**

Meet with the Student Activities coordinator to approve the date of the event. If date is appropriate, the date will be held for two weeks while appropriate signatures are acquired.

Date Approved     Budgeted Event (if not, minutes attached)

\_\_\_\_\_  
Student Activities Coordinator Signature

\_\_\_\_\_  
Date: MM/DD/YY

**Fundraising**

Fundraising Event:  Yes  No    If yes, where will proceeds go? \_\_\_\_\_

Date set for training in cash-handling procedures.

\_\_\_\_\_  
Foundation Staff (If Foundation-related event) Signature

\_\_\_\_\_  
Date: MM/DD/YY

**Location**

Reserve and confirm event location with appropriate staff. Initial contact must be made and the application form must be filled out by club/organization advisor before approval is granted.

- Conference Services (Klein, Webber, Cafeteria, etc.) – Manager for Conference Services
- Hallway in the Bryant Student Union, Center Lawn – Student Activities Coordinator
- Gym – Director of Athletics
- Charles R. Dassance Fine Arts Center – Director, Visual and Performing Arts

Location approved.       Additional costs for custodial services: \_\_\_\_\_

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date: MM/DD/YY

**Contracts**

If an outside vendor is being utilized, contracts must be submitted and approved by college administration. Originals must be routed for review and approval; attach a copy to this form when returning it to the Office of Student Life. An Agreement to Provide Professional Services form must also be completed and routed for signatures. Attach a copy to this form.

- No contract required.
- Contract required and ordered by the advisor.
- Agreement to Provide Professional Services form completed.
- Reviewed by the vice president for Student Affairs.

\_\_\_\_\_  
Vice President for Student Affairs Signature

\_\_\_\_\_  
Date: MM/DD/YY

Reviewed by the senior vice president for Administration and Finance.

\_\_\_\_\_  
Senior Vice President for Administration and Finance  
Signature

\_\_\_\_\_  
Date: MM/DD/YY

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Conference Services**

When using 02 funds for catering and food service, CF Conference Services must be given the first right of refusal to provide the service.

- Conference Services will provide the service for an approximate cost of \$ \_\_\_\_\_ **Attach quote.**
- Conference Services will not provide the service. The use of \_\_\_\_\_  
has been approved.
- The following documentation from the approved vendor is required:

\_\_\_\_\_  
Manager for Conference Services Signature

\_\_\_\_\_  
Date: MM/DD/YY

## Insurance

Insurance must be provided by any vendor/novelty that is brought to campus that increases the risk of injury to our students.

- No additional insurance required.
- Additional insurance required; Certificate of Insurance provided by the vendor.
- Additional insurance required; meeting held with director of Purchasing to purchase insurance.

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Director for Purchasing Signature

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Date: MM/DD/YY

## Public Safety

Contact Public Safety staff for recommendations regarding event security.

Recommendation for public safety:

- None required.
- CF officers required. How many? \_\_\_\_\_
- Off-duty Ocala Police Department officers required. How many? \_\_\_\_\_
- Approximate Cost: \_\_\_\_\_

## Parking

- Where will attendees be directed to park? Lot No.: \_\_\_\_\_

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Manager for Public Safety Signature

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Date: MM/DD/YY

## Ordering/Purchasing

If additional ordering or purchasing is required for an event (trophies, signs, etc.) a quote must be attached to this form for review prior to placing the order. After approved, purchasing can take place once an invoice is received in the Office of Student Life along with a Purchase approval form.

- Ordering/purchasing not required.
- Ordering/purchasing required; quote attached.
- Ordering/purchasing approved.

## Equipment Checkout

If equipment is needed, submit the Equipment Checkout form to the Office of Student Life for approval.

- Equipment not required.
- Equipment required; form completed.

## Publicity

If publicity is needed, submit the Publicity Request to the Office of Student Life for approval. Email to [shipec@cf.edu](mailto:shipec@cf.edu) or [dodgej@cf.edu](mailto:dodgej@cf.edu) for approval.

- Publicity not required.
- Publicity required; form completed.

## Plant Operations

A work order for Plant Operations will be completed with the Office of Student Life staff if tables, chairs, trash cans, electric, etc., are required.

- Additional costs for staff time: \_\_\_\_\_

Work Order No.: \_\_\_\_\_

## Information Technology

A work order for Information Technology will be completed with the Office of Student Life staff if additional equipment is required (outside microphones, etc.).

Additional costs for staff time: \_\_\_\_\_

Work Order No.: \_\_\_\_\_

## Final Approval

Once all appropriate steps have been completed, bring this form with required signatures and copies to the Office of Student Life. The director of Student Life and Student Activities coordinator will review and approve — or require additional information. Once an event is approved, all college departments that have been contacted will receive an email that the event has been approved and it is a “go.” The club/organization will receive a copy and the original will remain in the Office of Student Life. Once the event is over, the form will be filed in the appropriate club/organization file.

\_\_\_\_\_  
Director for Office of Student Life Signature

\_\_\_\_\_  
Date: MM/DD/YY