

Student Club/Organization Event Proposal Form

If event is approved, facilities request form must be submitted.

Club Name:	·			
What is the	event?			
Why are you	u having this event?			
Гarget Audi	ience for Event: OCC Students	Faculty/Staff General Public		
Day & Date	of Event:	Location:		
Event Time:	:am/pm until a	am/pm Set-up Time:am/pm		
Have you su	bmitted a room request (R25 form	n)? Yes No		
Would you l	like this event promoted on social	media? Yes No		
Member in (charge of event:	Phone #:		
Email:	······			
What are yo	our estimated expenses? (for ex. Sp	peaker fees, refreshments, decorations)		
	Names o	of Confirmed Volunteers		
Set Up:	1	2		
	3	4		
Publicity:	1	2		
	3	4		
Event Staffing:	1	2		
	3	4		
Clean-Up:	1	2		
	3	4		
Are you con	nmitted to attending this event? Yes No	Are you committed to attending t Yes No	his event?	
Club President Signature Date		Club Advisor Signature	Date	
Assistant Dir	rector of Student Life Date			