



# MARKETING REQUEST FORM

Please complete this form to request the development, creation, or revision of any marketing/communications materials. Please allow for a minimum of a three-week turnaround time for each request. Large-scale projects may take longer, while small projects may take less time.

**Factors that may affect turnaround and completion time include:**

- Scope, size, and complexity of project requested
- Availability of resources and/or materials
- Priorities and deadlines of marketing department, vendors, media, etc.
- Workload of marketing department
- Cooperative and collaborative efforts of the requestor, approver, marketing department, committees, departments, and other resources
- Special event dates
- Other factors that may apply

DATE OF REQUEST \_\_\_\_\_

DIVISION \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

REQUESTOR'S NAME \_\_\_\_\_

REQUESTOR'S EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

APPROVER'S NAME \_\_\_\_\_

APPROVER'S EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

**PROJECT NAME / TITLE:** \_\_\_\_\_

**DATE NEEDED:** \_\_\_\_\_

Description of Request:

This Project Is:        \_\_\_ NEW        \_\_\_ Update/Revision of a previous piece

**1) Purpose/Objective of Project**

**2) Target Audience**

- \_\_\_ Prospective students – High School
- \_\_\_ Prospective students – Adult Learners, Ages: \_\_\_\_\_
- \_\_\_ Current Students | Description: \_\_\_\_\_
- \_\_\_ Parents
- \_\_\_ Faculty/Staff
- \_\_\_ Alumni
- \_\_\_ Donors
- \_\_\_ Partners/Community | Description: \_\_\_\_\_
- \_\_\_ Other (describe): \_\_\_\_\_

3) Key Messages, Benefits of Program, Unique Selling Proposition

4) NOTES / INSTRUCTIONS / OTHER INFORMATION (Include attachments or samples as needed.)

5) Marketing Materials/Media Requested (We will also make any recommendations that may apply)

Brochure | Quantity: \_\_\_\_\_  
 Fact Sheet | Quantity: \_\_\_\_\_  
 Email Template | Description: \_\_\_\_\_  
 Handout | Quantity: \_\_\_\_\_  
 Flyer | Quantity: \_\_\_\_\_  
 Poster/Sign | Quantity: \_\_\_\_\_  
 Electronic Signage | Location: \_\_\_\_\_  
 Print Ad  
Publication Name: \_\_\_\_\_  
Publication Contact Name: \_\_\_\_\_  
Publication Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Ad Size (Dimensions)/Specifications: \_\_\_\_\_  
 Color  Black & White | Ad Deadline: \_\_\_\_\_  
 Roll-up Banner | Quantity: \_\_\_\_\_  
 Direct Mail | Quantity: \_\_\_\_\_  
Geography/Zip Codes: \_\_\_\_\_  
Demographics/Criteria: \_\_\_\_\_  
 Postcard/Card | Quantity: \_\_\_\_\_ Size: \_\_\_\_\_  
 Invitation | Quantity: \_\_\_\_\_  
 Video (Marketing video; not course video)  
 Website | Web Address: \_\_\_\_\_  
 Banner slide for website | Link banner to web address: \_\_\_\_\_  
 Social Media | Description: \_\_\_\_\_  
 Promotional Item | Description: \_\_\_\_\_ Quantity: \_\_\_\_\_  
 Other: \_\_\_\_\_

6) Is Photography Needed?  No  Yes (Please Describe Below)

7) Delivery Instructions

Your Budget: \$\_\_\_\_\_, OR \_\_\_Unknown

FOAPAL: \_\_\_\_\_

**MARKETING DEPARTMENT USE ONLY**

Reviewed/Accepted By: \_\_\_\_\_

Date: \_\_\_\_\_

Assigned To: \_\_\_\_\_

**Thank you for your request.**

**PLEASE SUBMIT REQUEST VIA EMAIL TO: [marketing@lcc.edu](mailto:marketing@lcc.edu)**

*Please save/print a copy for your records. You will be contacted by an LCC Marketing representative to discuss your request after it has been reviewed.*

