

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

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.

